

# **The Impact of Violence and Abuse on Child Protection Workers**

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## Declaration

I Lisa F M Wilkins hereby declare that, except where explicit attribution is made, the work presented in the thesis is entirely my own.

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Lisa F M Wilkins

## Abstract

According to the Department of Health (2000) social workers are eight times more likely than any other professional to be attacked at work. Research suggests that there is underreporting of violence and a passive approach to risk management by employers. In the last thirty years only seven studies examining violence towards child protection workers have been published. There is a danger then that old figures, statistics and research findings, dating back to the 1980s, are still being used to represent everyday practice, years after the research was conducted.

This study presents a current analysis of the personal and professional impact of violence and abuse in practice. Therefore, the key objective is to offer an original and contemporary analysis of the form, frequency, experience, affect and management of violence and abuse perpetrated against child protection workers.

The study examined the problem from a variety of theoretical perspectives, however it utilises concepts developed by Ulrich Beck in the 'risk society' to theoretically underpin the thesis. To gather both a statistical and qualitative set of findings a mixed method approach was employed. Seventy-one social workers from two local authorities based in England took part in the study. The policies from each council were analysed to provide a contextual framework to the empirical findings. An online questionnaire encompassing the four central aims of the thesis was sent to a sample group of one hundred and thirty child protection workers. The questionnaire was then used to filter participants who had experienced violence for the semi-structured interviews, providing a sample group of twenty-six child protection workers.

The findings demonstrate that violence and abuse are accepted as part of the job by child protection staff, management and the organisation. Interview data found that certain child protection tasks often carry greater risks than others. Workers reported that they had 'no faith' in current policy and procedure, describing them as fundamentally ineffective. In turn, workers admitted to withdrawing services or changing their decisions as a reaction to violent or abusive episodes. The majority of staff stated that they would not report verbal or physical abuse.

Overall, it was concluded that the impact of violence and abuse towards child protection workers has three key contributory factors: the worker, the team and the organisation. Each factor in some way contributes to the assessment, prevention, production and management of violence and abuse in practice.

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*"Be the change you wish to see in the world" (Mahatma Ghandi)*

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In loving memory of James Gerard Madigan 1929 – 2009.

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## Introduction

*'Fighting talk; for many social care staff, being punched, kicked, spat at and verbally abused is all part of the job'*  
(James, 2001).

This thesis aims to offer a researched analysis into child protection workers' experience of violence. Of particular interest is the impact of violence on the child protection worker in practice. The thesis will operate on the premise that the impact of violence is negative and has an adverse effect on the worker. Based on this supposition, the thesis will explore the role violence plays when it becomes a conflict of interest in the assessment process for the decision-making professional. The procedures currently in place to manage violence, threats and abuse toward the worker will be investigated. Finally, recommendations for effective change to current policy and procedure will be proposed.

Central to the thesis' contextualisation of violence and abuse is the theoretical framework set out by Ulrich Beck in 'The Risk Society' (Beck, 1992). The theories chapter will examine ten theories on risk, which contribute to our understanding of violence perpetrated against child protection workers. Although it is argued that Beck is the most relevant theorist in relation to the aims of this thesis. A discussion of risk within the child protection environment will demonstrate that violence and abuse are 'characterised by the institution', in this case the institution of social services, and how Beck's theory of modernity is reflected within the organisation. The thesis seeks to analyse what effect this has on the practitioner's everyday life. Beck's hypothesis informs the argument, methodology and later the recommendations of this study. The thesis will present a comprehensive overview of the violence, abuse and threatening behaviour that have allegedly become 'typical' to the social work profession.

To achieve the aims and objectives of the study two local authorities in England were selected to take part in this study. This provided an opportunity to capture one hundred and thirty child protection workers views by using an online questionnaire and semi-structured interview.

### Aims, Objectives and Research Questions

The central research question seeks to understand the impact of violence and abuse on the child protection worker. Therefore the thesis has a clear set of aims and objectives. Aims are set to determine what the research will look to find and objectives support the longer term goals of the project i.e. what the research looks to achieve.

### *Study Aims*

To better analyse the personal and professional impact of violence and abuse on child protection workers.

To understand what, if any, impact violence and abuse has on case management and the vulnerable child.

To impact upon policy and practice within child protection organisations which will ultimately, improve service delivery and the personal and professional lives of child protection workers.

### *Objectives*

To effectively answer the central research question objectives must be set, which will provide a reviewing process for the thesis. The objective of this study is to provide research with an up to date understanding of the impact of violence and abuse in child protection work. The long term objectives of this study are to improve services for children, make workers safer, and draw attention to the difficulties faced by workers operating in this particularly complex area of social work practice. The study will present considerations for policy and practice and address current practice complexities with regard to violence and abuse. Therefore four key areas of violence and abuse within the child protection setting must be examined. To achieve these aims and objectives there are four research questions which will guide the study.

### *Research Questions*

The research questions will allow the study to offer an analysis of current social work practice and therefore provide a well-evidenced answer to the central research question. The questions were theorised in an attempt to be inclusive of topics which affect the impact of violence and abuse but are also questions which have previously been overlooked in academic studies (see literature review – Chapter One). The four questions posed are:

#### **1. Form and Frequency**

What form does violence take in the child protection setting and with what frequency are threats, abuse and physically violent behaviour experienced?

#### **2. Experience and Reporting**

To what extent does prior knowledge of potential violence or abuse negatively impact on the reporting of incidents and the child protection workers experience in practice?

### **3. Affect and Management**

If violence and abuse are customary in everyday social work practice, then what affects does the fear of and actual violence have on: i) the child protection worker's approach to the case; ii) the worker-client relationship and iii) decision-making?

### **4. Policy and Practice**

How can policy and practice be improved in relation to the findings of this study?

These points will guide the theoretical approach, methodology and examination of the findings. It is believed that these four areas of discussion provide the thesis with an original analysis of violence and abuse in practice. The aims and objectives of this study will be met through asking these four research questions, thus providing a contemporary and unique analysis of everyday child protection practice.

#### *Method and Approach*

The study will use a mixed method approach to determine the statistical and experiential aspects of violence and abuse. There are currently twenty two thousand and fifty registered child protection workers in the UK (Community Care, 2012). Within the restrictions of this PhD study it is not possible to approach all local authorities and therefore two local authorities will be approached to take part in this study. The policy and procedure documents from each council will be analysed to gain a contextual understanding of practice. Later an online questionnaire will be sent to one hundred and thirty child protection workers. Finally, child protection workers who have experienced violence and abuse will be given the opportunity to expand on their questionnaire responses in an interview (twenty social workers were interviewed). The findings will generate ideas for new ways of working within child protection.

#### Concepts and Definitions

There is a degree of contention in relevant literature as to a working definition of 'violence'. In research from the 1980s and 1990s 'violence' was defined as a 'purely physical act' (Brown, Bute and Ford, 1986). However, in contemporary literature the classification of 'violence' has been expanded to be inclusive of indirect actions, as well as workers' subjective experiences

(Littlechild, 2003 and Waddington *et al*, 2006). Therefore this study looks to include the personal experiences of child protection workers alongside an examination of institutional understandings of violence and abuse, in order to derive a more standard working set of definitions.

The definitions used are taken directly from the Directors of Social Services and the Department of Health, two institutions which shape policy and dictate procedure for child protection workers.

The Association of Directors of Social Services describe violence as 'damaging', thus supporting the premise on which this thesis is based. This study will utilise the following definition: "Violence is behaviour which has a damaging effect either physically or emotionally on other people" (Kemshall and Pritchard, 2001:162). Violence therefore would have, as suggested, a negative impact.

According to the Department of Health (2000) "abuse is the violation of an individual's human and civil rights by any other person or persons. Abuse may consist of a single or repeated act. The abuse can be physical, verbal, psychological, financial, or emotional" (DOH, 2000).

Social workers are concerned with social problems, their causes, their solutions and their human impacts. Jowitt's definition of a child protection worker's role states: "[child protection workers] protect children and young people who are 18 or under and encourage family stability. Most children who come to the attention of the child protection team, do so because they are often collectively being abused by a parent or care giver" (Jowitt, 2007: 22).

When referring to people who use child protection services the thesis will in the main use the term 'client', on occasion where appropriate the term 'service user' will be utilised.

### Relevance of this Study in the Academic and Practice Setting

In part, the motivation for this research comes from my personal experience of social work practice. After graduating as a qualified social worker and working directly in the child protection setting I felt that current child protection practices were ineffective and therefore were potentially leaving families and staff vulnerable to risk, abuse and ultimately in some cases death. I undertook this PhD with the aim of improving child protection practices for staff but ultimately for those people receiving services. I believe that if you improve the lives of social workers then you can directly improve service delivery. I felt frustrated as a worker on the frontline, tied by bureaucratic procedures which left staff burnt out and children vulnerable to physical, sexual

and emotional abuse and neglect. From my viewpoint as a practitioner, social work is overwhelmed with violence and abuse on a daily basis, which is why I chose to explore this specific topic in more detail. Prior to starting my research I believed that staff or children who are victims of violence or abuse can be left with damaging physical or emotional side-effects which can remain with them for life. This was confirmed by current research and the findings of this study which motivated me even more so to complete this thesis with a view to better protect frontline workers by changing current practice.

It has been well-documented both in the media and within social work agencies that violence and abuse at work has led to colleagues being murdered in the line of duty. Moreover, where social workers have been in place to protect vulnerable children, the intimidation, threat and fear felt by staff has ultimately left children and families at greater risk of serious harm and indeed death, for example Victoria Climbié (Laming, 2009). For these significant reasons I felt that it was imperative for the impact of violence and abuse in practice to be better researched, so that a more robust set of policies and procedures could be set in place in an attempt to change current practices to better protect staff and vulnerable families.

There is substantial evidence to suggest that violence and abuse exist in the child protection environment (this evidence will be presented in Chapter One). The focal point of this thesis is not simply based on the existence of violence in practice but rather how the worker perceives, experiences and manages violence. As is demonstrated in chapter One (Literature Review) of this thesis, there is a clear deficiency in both governmental and academic research on the extent, form and experience of violence in the child protection setting. Ideas on this subject are currently dominated by the media, often in the aftermath of a child murder (such as the Victoria Climbié case 2009). The topic around which the research is based is both relevant and significant if an attempt is to be made to understand how child protection work, policies and procedures operate in practice. How do child protection workers construct personal perceptions of fear, risk, and violence? The study aims to understand how these perceptions relate to the central research question. What impact do perceptions of violence have on the worker and professional practice? This thesis aims to investigate the interplay between the worker and their experiences in practice. How personal perceptions affect case management and service delivery is of particular interest for this thesis.

The National Task Force (2000) launched a two million pound campaign promising that by March 2005 violence and abuse against social care staff would be reduced by twenty-five per cent. To date they have not reached this target. One of the problems with this target was that



the government didn't specify specifically enough what they meant by violence, and therefore it was unclear as to what was being measured or reduced. Violence against child protection workers therefore warrants further research because in the eight years following the formation of the National Task Force on Violence against Social Care Staff, three social workers have been murdered whilst carrying out their duties.

Today the position of social workers, who are expected to make home visits alone, is as precarious as ever. A poll of Unison members in June 2007 revealed that thirty-six per cent of lone workers experienced verbal or physical abuse on a daily basis (Unison, 2007). This statistic offers an insight as to why this research topic is just as pertinent now as it was in 2000. The figures shown and discussed above do not provide sufficient insight into what is happening from the workers' perspective, thus presenting a vague account of what is really happening in the experience of the child protection worker. The majority of relevant academic research does not differentiate between types of worker and so these figures are inclusive of all types of social worker, for example care worker, adult social care worker, residential care worker, and so on. Research relevant to the topic of violence in the workplace is saturated with quantitative studies. This thesis aims to bridge the gap, utilising qualitative methods (as well as an online questionnaire) in an attempt to offer an insight into the child protection workers' experiences and perceptions of violence, including their approach to reporting incidents of violence.

There is a perception in current literature that violence and abuse is underreported (Norris, 1990; Lupton and Gillespie, 1994; and Bowie, 1996). If this is the case, with reflection on the above statistics regarding violent incidents, underreporting of violence and abuse is concerning. This is significant since the statistics gathered from reported violence provide social care institutions with a clearer assessment of the situation facing the worker, their colleagues and other professionals (Braithwaite, 2008). If underreporting of incidents remains a key characteristic within social services it will become impossible to gain a clear understanding of frontline realities.

As part of the central research question this study aims to investigate two topics: to what extent is violence underreported, and why is there underreporting in practice? The information gathered will attempt to gauge the 'missing' figures, providing a more coherent analysis of the frequency of violence and abuse in the child protection environment. This frequency will support the central research question and analysis of the impact of violence and abuse. The methods used to gather information will be mindful of the individuals' reluctance to report, and inclusive of appropriate anonymity to encourage open discourse. An evaluation of the current

effectiveness of organisational and professional responses to violence must be undertaken, alongside an investigation of the response to actual incidents and threats of violence by occupational organisations. This evaluation could prove vital to unlocking underreporting in child protection teams.

As previously mentioned, this thesis assumes that the impact of violence has a negative impact and effect in practice. Therefore the fine balance between workers trying to maintain personal safety whilst ensuring the best results for the child is easily disrupted (Braithwaite, 2008). Failure as a consequence of fear can lead to workers failing in their objective to protect children living in violent families. NSPCC statistics show a high number of child deaths in cases that are known to social services. The suggested correlation of these statistics raises questions as to whether there is a relationship between poor case management leading to child death, and a worker fearful of abusive parents. This warrants further investigation as over a sustained period these figures have not seen a decline.

It has been suggested that on occasion workers focus too intently on the welfare of the child to the detriment of personal safety (Lupton and Gillespie, 1994; Broadhurst *et al*, 2004 and Waddington *et al*, 2006). A workplace culture that insists child protection issues are addressed irrespective of poor staffing levels, working alone in emotionally charged situations and legislative restrictions reinforces this approach. Hunter (2008) found that the majority of staff did not feel confident that council policy and procedure ensured their safety at work. These statistics lend significant credence to the notion that social workers are not supported appropriately when entering potentially chaotic, threatening and violent homes.

It is noteworthy that when social work clients behave in a threatening or violent manner, one of the sanctions applied is the removal of home visits. This means that any future meeting must be held in a controlled environment, usually the offices of social services. After the well publicised death of Victoria Climbié (2009), the subsequent inquiry reiterated the importance of home visits. Thus it is fair to suggest that violence toward the social worker can directly place an endangered child at greater risk. The impact of violence on child protection workers is twofold. Violence personally affects the worker; its impact can then indirectly effect case management and the vulnerable child. The extent to which violence impacts on the worker's approach to a case is currently an ambiguous area in literature and research and as such will be explored as part of this thesis.

## Justification for the Thesis Structure

This thesis will include a detailed literature review in order to understand the child protection worker and their current position in the field. An extensive review of published literature concerning fear, risk, violence and supervision within social services will be presented in Chapter One. It is fair to assume that due to the child protection workers' duties and responsibilities, reports and research of violence and abuse should exist to determine the extent to which child protection workers are at risk in the workplace. However, preliminary research suggests that there is in fact a distinct lack of statistical evidence surrounding violence and threats of violence toward the child protection worker. That this area of research is bereft of recent empirical analysis requires further consideration.

The literature review will raise essential questions and points for further investigation. These details will form the basis for the ensuing empirical research. This will ensure originality, as questions posed and research gathered will endeavour to look into areas previously untouched or where a relatively small amount of research has been undertaken. Thus taking the existing areas of literature and research and viewing these from a different and innovative perspective.

The central points of discussion will be supported by existing social theory and this is explained in Chapter Two. A number of theories are used to attempt to better understand risk, violence and abuse in child protection work. It was ultimately argued that Ulrich Beck's risk society is best suited to provide the study with a framework for examining the impact of violence and abuse in child protection. The risk society allows for a generalisation of the problem, and classifies the areas that this study aims to answer. Within this study the risk society is used to systematise and organise the child protection workers' everyday experience. Risk society theory places violence perpetrated against child protection workers within wider social transformations.

This thesis aims to explore the relationship between worker and institution in more detail. Beck's theory argues that institutions are responsible for the characterisation and assessment of risk. Beck's ideas have been reflected in the specific questions chosen for the questionnaire and semi-structured interviews, for example, questions relating to Beck's concepts of individualisation and social reflexivity, questioning workers on their feelings of isolation and independent risk assessment in practice. In this case, the thesis looks to test the applicability of the concepts within the risk society to the processes and implications of risk and violence in child protection. The concepts illustrated by Beck predict the impact of violence and abuse and

inform the methods to draw out the causal inferences and conclude them. This theory will also be used to increase understanding and insight during data analysis.

The methodological approach of this study will be discussed further in Chapter Three. A mixed method approach was employed, including an analysis of relevant documents, questionnaire and semi-structured interviews. At present, relevant literature presents more statistical results than qualitative evidence. Having said this, there is still a need for further statistical information on the prevalence of violence toward child protection workers. This provides the justification for a questionnaire to be sent to more than one organisation in an effort to provide comparative evidence. Accumulating the relevant quantitative data will support the validity of the thesis by producing results which are replicable.

The quantitative data will also be used to filter appropriate candidates for the semi-structured interviews. The interviews will be utilised to gain a more intimate understanding of the worker's feelings, opinions and management of violence in the workplace. Qualitative methods will also enable the researcher to capture the manner in which respondents conceptualise their own understanding of risk and violence. Alongside these methods, an examination of relevant policy documents will be conducted. Each council's procedures, policies and training programmes will be analysed and later compared in the findings.

The findings from the online questionnaire, semi-structured interviews and the review of council documents will be presented in the form of four findings chapters (Chapters Four, Five, Six and Seven). These chapters will provide a descriptive narrative of the quantitative findings. The council policies will be described and reviewed in Chapter Four, followed by a chapter presenting statistical data from the online questionnaire (Chapter Five).

Due to the wealth of information gathered in the semi-structured interviews, the qualitative findings are presented in two chapters. The first details the form, frequency, experience and reporting of violence in practice whilst Chapter Seven describes the organisational approach to affect, management, policy and procedure. The study found that violence and abuse are underreported by staff; workers do not feel appropriately supported in the field or in the aftermath of an incident. The council policies and procedures upon analysis were found to be contradictory and neglect to recognise the impact or appropriately equipped front line staff. Child protection workers felt most vulnerable working with clients who held criminal convictions, at child protection conferences or whilst in court. The findings ultimately show that violence and abuse has a negative impact professionally and personally on the individual.

These descriptive chapters are then analysed and combined in the discussions chapter (Chapter Eight) which examines the correlation between all three methods of data gathering. The discussions chapter draws together the findings, analyses them and then makes suggestions for policy and practice.

The findings and conclusions drawn from the employed methods will be used to construct an original analysis of the impact of violence and abuse on the social worker. These conclusions will simultaneously contribute to a more comprehensive understanding of the form, frequency and personal experience that said violence or abuse takes in the child protection environment. The results will be presented in the discussions chapter (Chapter Eight) which provides a contextualised narrative feedback of the findings. The chapter provides a detailed perspective of the relationship between the institution, the team and the worker, whilst reflecting the impact, experience and management of violence in practice. The analysis will highlight evidence of best practice which could be used in other organisations and areas for improvement across the board. Finally, these observations will look to generate widespread suggestions for improvements and changes to policy. The thesis will now begin with Chapter One – the literature review.

## Chapter One: Literature Review

*“Violence and abuse are common in the social care sector. Social workers in particular have been found to be eight times more likely than the average employee to experience physical attack” (DOH, 2000).*

### Introduction

This chapter presents a review of the relevant international literature on violence and abuse in child protection, offering a varied and analytical approach to the topic. The review aims to narrow the field of focus for the thesis, developing suggestions posed in the introduction and ascertaining questions for further examination.

The central focus for all the literature reviewed is the nature and prevalence of violence against social workers; however, the premises upon which the studies are based change every decade, i.e. within approximately a ten-year period the supposition on which a study is based correlates with others in that era. In the 1980s, literature analysed the management, response and framework for practice with respect to violence (Brown *et al*, 1986; Rowett, 1986; Johnson, 1988 and Breakwell, 1989). The 1990s saw a shift in focus to prevention and reduction of violence and the care and support of staff in the workplace (Norris, 1990 and Gill *et al*, 1999). From 2000 onwards there has been a keen interest in the form, frequency, increase, effect and extent of violence in social work (Stanley and Goddard, 2002; Littlechild, 2002; Littlechild, 2003; Littlechild, 2005 and Bowie *et al*, 2005). For this reason, it is most appropriate that the following chapter will present a chronological review of published literature rather than a thematic account. The aforementioned correlation between decades provides the rationale for such a template to be used. By reviewing the literature decade by decade, both current (to date) and relevant (historical) literature within the field of study can be presented.

### Background

The literature reviewed in the following chapter was sourced after a thorough and exhaustive search for research relating to violence in social work. Inclusive within these studies are publications which focus solely on violence and child protection work. Originally the search for relevant literature looked specifically to those studies focusing on child protection work; however, as there were only seven published studies it was decided that the literature review should include social work in general. It was not thought that this would affect the fidelity of the literature review as the more general research did include children's social care. When sourcing studies on violence the same institutional definition as detailed in the 'Introduction'

was used, in that, studies selected in some way referred to violence, abuse, threat, stress and impact for staff in practice. In total twenty - two studies were found, a further decision was made to include relevant studies as well as current research due to the relatively small amount of literature published on this topic. Relevant literature includes those studies published in the 1980s and 1990s (inclusive of ten studies); current includes research published from 2000 onwards (total of twelve studies). The literature review is international and includes studies from the United Kingdom, Australasia, America and Europe (see Appendix 4).

### The Rise in Academic Interest

During the 1980s and 1990s nine social workers were murdered by clients whilst at work. The total is now twelve after three further murders took place in 2006, 2007 and 2008 (Braithwaite, 2008). According to Kemshall (2001), approximately ninety per cent of assaults on staff are by people who are known to social services and the perpetrators often have a history of abuse and violence. The relatively recent phenomena of violence towards social workers analysed in conjunction with the seemingly flawed aforementioned legislation has led to widespread academic interest. Recent research has attempted to understand why the procedures and legislation in place fail to protect workers against risk, danger and exposure.

Loss of life as a result of violence at work is without question the most abhorrent of all consequences but the impact of violence can also cause long-term physical effects, stress, depression and anxiety. The perception among social work managers is that over the past ten years, forms of indirect violence such as threats, intimidation and aggressive posturing have seen an increase and are now more commonly experienced (Braithwaite, 2008). The number of assaults against social workers reported to the authorities has more than trebled since 1994 (O'Connell, 2004).

Research by the Department of Health (2000) indicated that compared to the average employee, social workers are eight times more likely to experience physical attack whilst at work. This, coupled with the suggestion by many academics that violence is underreported in the social work sector, represents a worryingly high number of incidents (Norris, 1990; Lupton and Gillespie, 1994; and Bowie, 1996). It appears that there is a difference between male and female experiences; males are more likely to be attacked physically and suffer a more fervent verbal threat, whilst their female counterparts are reportedly more likely to experience verbal abuse (Brown *et al*, 1986).

In some agencies, mobile phones or personal alarm systems are being used as a substitute for being accompanied by a colleague, which might suggest a reason for a reportedly high number of violent and abusive incidents. Hunter presents figures from the British Crime Survey by the Health and Safety Executive that showed “one hundred and eighty thousand reported incidents of threats and actual assaults toward social workers in 2008” (Hunter, 2008: 6). This is a worryingly high figure as it is also suggested that there are still a vast number of cases going unreported by staff: “Almost a quarter of workers claim their organisation was not addressing lone worker safety. Where an employer did have a lone worker safety mechanism in place, fifty-four per cent said they did not have confidence in it” (Hunter, 2008: 5). According to research by the National Institute for Social Work (NISW) many social workers still fail to report violence against them and often only the most serious incidents are reported (Bowie, 1996). According to Braithwaite (2008) the attitudes underpinning this failure to record must be questioned.

Families working with child protection agencies are also being affected. The NSPCC reports that one hundred and thirty-six children die per year in England at the hands of their parents or caregivers. This represents one to two child deaths each week as a direct result of cruelty. Moreover, the NSPCC report that there has been no sustained decline in the overall number of children killed by their parents for several decades (Home Office, 2007). These findings include three high-profile public cases; Victoria Climbié in 2000, Baby P in 2007 and Amy Howson in 2009. Forty-two per cent of social workers who are victims of physical assault said it had adversely affected their practice (Kemshall *et al*, 2001). To some extent this documented effect on case management might explain why there are currently two hundred thousand children still living in homes where there is a high risk of abuse or domestic violence (Byers, 2009). The chapter will now go on to present a chronological review of recent and relevant literature.

### **Chronological Literature Review**

From 1986 onwards there has been a surge in research focusing on the phenomena of general workplace violence. Specific studies on violence in the social work setting are represented by a core of twenty - two studies. Studies undertaken in the past ten years do not provide a widespread or statistically reliable reflection of practice and fewer than half of the studies on the topic were published in the twenty-first century. Moreover, the studies from the twenty-first century rely on a methodology of ‘literature review’ with Stanley and Goddard (2002) and Littlechild (2005) producing the only empirical research in this era. Studying ‘older’ sources provides contextual analysis and demonstrates how research has developed in this field. Norms of tolerable aggression undoubtedly exist in the caring professions. This rise in academic



interest demonstrates that in most of the caring professions an essential examination of the 'norms' is in motion. The chronological literature review begins with an analysis of the 1980s and the first study was presented by Brown, Bute and Ford in 1986.

## **The 1980s**

Between 1978 and 1985 it was reported in the press that four social workers had been murdered by their clients. It was also reported at the time that one in four social workers were attacked in the line of duty (Breakwell, 1989). As a response to the popular media reports four academic studies were undertaken to investigate the emergence of violence within social work practice. Brown, Bute and Ford (1986) conducted their study after a colleague was murdered by a service user. The study aimed to encourage staff to respond to threatened violence in ways that minimise risk. Rowett (1986) noted the supposed increase in violence and abuse, his study aimed to assess how violence was reported in social work and the support given in recording incidents and supporting staff. Johnson (1988) examined the supposed rise in violence and abuse in social work according to the news and the reaction from Local Authorities. In 1989 Breakwell summarised effective ways to manage violence and the traumas involved. The basic premise for both studies was to assess response and management skills that minimise harm to the worker and to sustain a framework for best practice.

### Methodology and Main Findings

In an attempt to examine violence within social work, Brown, Bute and Ford (1986) utilised the method of questionnaire to gather statistical information. This methodological approach was rationalised by the authors for its ability to capture the in-depth personal perspectives of the social worker in practice. A non-random sample group of five hundred and sixty staff working in the personal social services in Wessex were sent a questionnaire, of which three hundred and thirty-eight responded. Brown, Bute and Ford (1986) found that one hundred and thirty-four people (forty per cent) had been threatened at least once; one hundred and two of these (thirty per cent of the total) had been threatened more than once in the preceding three years. The threat of violence was causing increasing concern for practitioners, particularly in the caring professions. The forms of violence disclosed by the respondents spanned from: abuse, shouting, intimidation, physical attack and threats. Violence was defined as "actual physical assault resulting in some injury or pain, while violence to property involved some actual damage" (Brown, Bute and Ford, 1986: 1). Although abuse was not recognised in the working definitions of this study, as early as the 1980s verbal threats were beginning to be recognised

as an issue for the worker and a 'norm' within the profession. Defining violence and understanding the individual experience is an area for development within this study. Unlike in Brown, Bute and Ford's study (1986) abuse will be included as part of the working definition in this thesis.

Rowett (1986) conducted a national three stage research study. He used questionnaires, direct mailings and structured interviews to ascertain the extent of violence in social work. He interviewed a group of social workers (60 workers) who had experienced physical violence and a group of social workers who had not. He asked those that had been physically attacked to describe their most serious experience. From these three stages of research Rowett (1986) found that although the majority of reported physically violent incidents were minor there was an increase in reporting at each stage of his research. He concluded that this pointed toward an underreporting of violence in social work. He attributed the negative perceptions of social workers who were physically assaulted, poor supervisory responses and a lack of administrative recording to this underreporting. Rowett (1986) noted that only where there were serious incidents, for example, a murder, would a significant response from those in power to create change occur.

In response to news articles in Community Care reporting that social workers were being murdered by clients Johnson (1988) examined the Local Authority guide lines for staff which were written as a result of this reported increase in violence towards social workers. Johnson (1988) approached seven councils of which four agreed to allow her access to their policies. As part of the study Johnson (1988) presents key theories on aggression which were used to support the guidelines produced. Social Learning Theory and Freud's Innate Aggressionist theory are both used to better understand the violent perpetrator. Johnson highlights that in using these theories to underpin the Local Authorities guidelines it again places responsibility for managing the incidents of violence and abuse on the individual worker, Johnson (1988) questions whether this is right and ultimately who should be responsible for the management of risk. Johnson (1988) notes that in understanding violence purely from a theory on aggression, this could lead to a belief that violence is predictable and goes on to discuss the problems with assessing risk accurately. This study found that violence and abuse are expected and accepted in social worker, that the individual social worker is responsible for the assessment and management of risk in practice. Perhaps most importantly Johnson (1988) found that within Local Authority guidelines there are no regulations or requirements regarding the aftermath of an incident. She remarks that it is disheartening to find that although steps have been taken to

draw up guidelines that these still fail to address front line dilemmas. Johnson (1988) explains that the Local Authorities examined either do not mention support or do not require staff to do anything in response to violence and abuse.

In terms of actual physical violence Breakwell (1989) found death to be the most serious of consequences. Reports of attacks and injury which were serious but did not threaten life are readily available. For instance, in October 1986 Jean Rainey, a social worker from Southwark, was attacked with a meat cleaver by a client who had a history of psychiatric disturbance. She sustained serious injuries to her head and leg. Earlier in 1986, a forty-seven year old social worker was raped, stabbed and robbed in her own office by a seventeen year old male client (Breakwell, 1989). In response to this Breakwell (1989) suggests that there are 'norms' within practice. These norms were reported as representing 'acceptable' levels of aggression and agitation and are accepted as an inevitable part of the job. As such they are not taken seriously or noted as they are part of everyday normal social work practice. Using psychology and theoretical concepts of violence, Breakwell (1989) outlines what it is in professionals that may invite others to be violent. This study discusses how professionals can proactively change their personal approach when working with the powerful emotions experienced by service users, without inviting unnecessary risk. The study discusses both how social workers can predict which situations are likely to be dangerous and how to defuse encounters which deteriorate into violence.

#### The 1980s - Management and Response

Brown, Bute and Ford (1986) recognise that when working in an emotional setting such as child protection a worker is at greater risk than another field worker in a different setting. Although this pattern of difference is recognised, to date, there is still very limited research specifically focused on this area. Even with different methodological approaches Breakwell's (1989) findings reflect those of the 1986 and 1988 studies, highlighting again the extreme and incalculable danger that working with vulnerable people entails for child protection staff. The empirical research conducted in 1986 and 1988 is further complimented by Breakwell's analysis of theory and concept. These studies utilised methods that provide a holistic view of violence in the workplace, presenting the topic as an emerging theme which warrants further investigation. The findings of the 1980s provided a sound platform for future academic research.

## **The 1990s**

Studies in the 1990s focus attention towards the prevention and reduction of violence. The care and support of staff in the workplace was the focal point for research produced in this era. The intention of academics in the 90s was to methodically research every sector of social work, so the research would be inclusive of all workers in the caring professions.

Norris (1990) undertook the first study of the era, examining the support and care of staff in an attempt to improve service delivery. Feminist writers Lupton and Gillespie (1994) produced a study addressing the centrality of gender in relation to violence and the difference between experiences of violence. The late 90s saw four further pieces of research. Bowie (1996) aimed to teach practical, common-sense principles for the prevention and diffusion of violence and post-trauma support for assaulted workers. O' Hagan and Dillenburg (1996) dedicated a chapter to violence in the workplace, in an attempt to test the theory that the childcare system is in itself structurally inclusive of abuse and lends itself to both the client and worker being abused. In broad terms Pahl's (1999) study looked at the nature of violence as well as the incidence. The emergence of workplace violence was seen by Gill, Bowie and Fisher (1999) as a growing concern in an interdependent global economy. Of interest are the conclusions drawn from these studies and how they might translate to the child protection setting.

### Methodology and Main Findings

A small questionnaire was designed by Norris (1990) which placed emphasis on those issues missing from previous research. The small national survey was carried out by the University of Sussex School of Cultural and Community Studies. Views were specifically sought on the possible reluctance of social workers to report violence and the implications of this on the quality of their work. Norris', "research findings confirmed under reporting" (Norris, 1990: 67) reported prejudice in practice, so that when a service user is accused of violence or abuse, there is also an attempt to find fault with the 'incompetent' social worker. This leads to staff that are disinclined to report even the most serious of violent attacks. Perhaps then it is not surprising that as a profession social work has been reluctant to address and implement safety procedures. Residential staff appeared to lack necessary knowledge, skills and understanding of violence and this prevented them from providing a high quality service to the people in their care. According to Norris' (1990) study, "thirty-two per cent of respondents had experienced 'actual bodily harm'. Of the fifty-seven incidents recorded, eleven involved the use of an instrument and three cases are described as 'held hostage'" (Norris, 1990: 46). Norris also

found that in terms of reduction and prevention of violence only thirteen authorities out of the sixty studied kept records of violent incidents against staff. Research findings again confirmed underreporting and highlighted that certain activities carry a higher risk of violence. Child protection work was identified as posing additional risk, for example taking children into care. Substantive statistical research demonstrates the two aforementioned cases of social workers murdered in the line of duty reflect an increasingly worrying norm. With regards to the 'authorities' record keeping' this study will include an examination of council policy and procedures for the support and prevention of violence and abuse at work. Norris (1990) is the only researcher to include statistical data on authorities' record keeping. However, his is not the only study to mention the need for local authorities to protect their staff, nor is this the only study to make mention of the importance of support in relation to underreporting.

Lupton and Gillespie (1994) also exposed underreporting, stating that more women were underreporting in comparison to their male counterparts. To gauge the extent of underreporting Lupton and Gillespie conducted interviews with a small staff group of twenty-one social workers between 1980 and 1990. Within this time period the findings showed males had experienced four violent attacks whereas women had encountered three. It became apparent to Lupton and Gillespie (1994) that violence against social workers is merely defined as extreme physical violence. Therefore workers' experiences of sexual, emotional and verbal abuse are being minimised. Developing this point further from a feminist perspective, the study found that men are more likely to experience physical violence, whereas female workers suffered more verbal, emotional and sexual abuse than their male counterparts. Lupton and Gillespie reiterate recommendations from previous research; namely that violence needs to be firstly acknowledged and then supported through supervision and training.

The need for a study inclusive of more than one sample group is highlighted in the disparity between the results from the initial survey and the detailed follow-up conducted in Bowie's 1996 study. In a survey of all social services departments in Great Britain for reported violence against workers there was only one reported case of violence against a social worker from a sample of two hundred and fifty-nine local authority social workers. However, a detailed follow-up study of all social workers in one local council area found that one in four had been the victim of violence. Bowie makes recommendations based on conclusions drawn from case studies and a literature review. Bowie found that between 1980 and 1985, murder at work was the leading cause of fatal injuries for women and the third leading cause for men in the USA across all occupational groups. In 1981 the National Association of Local Government Officers

(NALGO) surveyed their members on the question of assault. The main categories of staff identified as at risk were housing and social services workers. The numbers of staff prepared to report incidents of violence is also of some note: once again this study indicates the possibility of gross underreporting of incidents, and highlights the vulnerability of workers in the caring professions.

Relying on an extensive literature review, O' Hagan and Dillenburg (1996) found that knowledge of violence and negative statistics fuelled anxiety in workers. A review of childcare literature, child abuse enquiry reports and childcare research raised this as a serious issue for professionals working with children and families. This finding that fear provokes anxiety in workers has to date not been further investigated, yet the 'risk society' is a growing phenomena in research. It is perhaps curious then that the two have not been examined in relation to each other.

Originally, violence and abuse did not form part of the study undertaken by Pahl in 1999. As with previous studies (Norris, 1990 and Bowie, 1996) violence and abuse was again found to be of increasing concern within practice. After carrying out a pilot run of the questionnaire Pahl redefined the questions to include the issue of violence. Forms of violence disclosed in the pilot spanned from; abuse, shouting, intimidation, physical attack and threats. It was assumed in the hypothesis that a high percentage of physical attacks were in the care and residential setting. Therefore the study focused on the type and frequency of violence against social workers, residential workers, managers and care assistants. Geographically, Pahl (1999) drew comparisons between England, Northern Ireland and Scotland. The research found that violence is more predominant in Scotland. It is more common in residential work. The majority of violent attacks took place during the daytime towards staff that described themselves as 'on duty'. In a quarter of cases, relatives of the service user were the perpetrators of violence. Men are reportedly more vulnerable than women. It was concluded that more support and help was needed. The findings reflect previous research conclusions, i.e. that men are more vulnerable to physical attack, there is suspected underreporting from women and the service user was most usually the perpetrator.

Gill, Bowie, and Fisher's study (1999) suggests that researchers and practitioners need to challenge current assumptions and increase their understanding of violence and abuse. Gill *et al* argued that every individual experiences certain types of behaviour differently. One person may view a situation as violent and threatening, whereas a colleague may not. The research suggested that it is important that the threatened person is offered support tailored to their

personal perceptions and individual experiences. A review of literature was undertaken to gather knowledge of the definitions and typologies of violence to assess this. Following this review, an open-ended questionnaire was used to establish the viewpoints of human resource managers. The analysis of questionnaire responses suggests that a framework for understanding abuse and violence against the nature of business premises is needed. By considering the lifestyles, routine activities and characteristics that promote abuse and violence, Gill *et al* suggest that a framework can be developed to predict and reduce the triggers of incidences and incident processes. The methods used and conclusions drawn are pertinent to the development of this thesis. Challenging current assumptions and managerial understanding within practice could encourage reporting of violence and a more efficient working model of risk assessment within practice.

### The 1990s – Prevention and Reduction

The 1990s era represents the majority of empirical evidence available on the topic, thus providing an insightful analysis of violence in practice. A collection of questionnaire and interview techniques were used. The questionnaire promoted a design that would yield maximum information with the least expenditure of time and resources on the part of the respondents. The decade provides a reflective statistical analysis of violence and abuse in social work. The use of questionnaire and interview methods provides both quantitative and qualitative findings, offering research an observed account of the worker in practice.

The 1990s offers practical principles for the prevention and diffusion of violence. Prior knowledge and experience of violence and abuse profoundly affected workers in practice. As such, the literature suggests it is vital that agencies acknowledge violence and abuse as an issue within practice and furthermore proactively offer support to staff. The findings reflect that in practice male workers are more likely to suffer physical violence than their counterparts, violence is under reported and each experience is unique to the individual situation.

The British Crime Survey 1992 showed that violent assaults at work doubled between 1981 and 1991. Social control roles and a negative image of social workers, as well as cuts in services and provisions are possible reasons for an increase in violence. Regardless of cuts in service and social control roles, the message from the 1990s is that more support and assistance is needed. As such, it is vital that this study assesses what has changed in the twenty-first century. How have social service departments changed, adapted and developed to incorporate a more effective support network for staff?

## **The Twenty-First Century**

In the twenty-first century researchers have developed an interest in the form, frequency, increase and extent of violence in social work. It also offers the first insight into violence and abuse specifically within the child protection setting.

Weinger (2001) examines the worker-client relationship and the implementation of safety procedures, spanning the end of the 1990s and the beginning of the twenty-first century. The first study specifically focused on the child protection setting was produced in 2002 by Littlechild perhaps prompted by studies from the 1990s which drew attention to the vulnerability of the worker in the child protection setting. Littlechild (2003) noted that prior to his research there had been a lack of studies which specifically examined violence in child protection work. Littlechild went on to publish three more journal articles in the twenty-first century focusing on child protection workers, violence and abuse (2005, 2005 and 2008). Stanley and Goddard (2002) examines this issue further, investigating the context in which violence surrounds severe child abuse and neglect and emotional isolation of the protective worker. Broadhurst, Hawkins, and Briggs (2004) examined how violence affects the child protection worker personally, their client and case and how violence is dealt with by management. Bowie, Fisher and Cooper's (2005) study features a focus on emerging issues in workplace violence such as, domestic related homicide, sexual and physical assault, and stalking. In 2006 Trotter looked to present a framework for practice with involuntary clients. By considering the practical implications of their research, Waddington, Badger and Bull (2006) provide and promote a 'moral dimension' in experiences of violence and conclude with clear messages for management.

### Methodology and Main Findings

Weinger (2001) found social service agencies and individual social workers often only take measures to increase employee and personal safety after there is a violent incident that causes serious injury. Weinger's literature review gained a clearer understanding of why and when violence occurred. The study worked on the basis that the feelings exchanged in the worker-client relationship make it difficult to consider that a client might behave violently. This relationship between client and worker is an area for consideration within this study. The rule of optimism is often applied by child protection workers, and in some cases being overly positive leads to negative consequences. Dingwall (1983) suggests that social workers often construct potentially violent situations involving children in a way that minimises potential harm. Weinger goes on to suggest that as a result of this optimism, social work as a profession has been



reluctant to address and implement safety procedures. This examination was then interpreted to provide definitive ideas and theories of how to cope when faced with a violent or abusive situation. Weinger (2001) states that half of all human service professionals will experience client violence at some point during their career. The 'knee-jerk' reaction to policy implementation needs to be addressed; this study proposes that in certain scenarios safety procedures could be established before violence or abuse occurs.

Stanley and Goddard (2002) agree it is possible that a worker can be traumatised by knowledge of violent and criminal activities in the community. The following illustrates an example of fear-inducing statistics: Stanley and Goddard found over fifty per cent of clients had a criminal record, and "the natural mother was recorded as being involved in criminal activity in twenty-two of the fifty family case files sampled" (Stanley and Goddard, 2002: 30). This statement links prior knowledge and the 'rule of optimism'. In 1983, Dingwall argued that social workers were applying what he termed as the 'rule of optimism' when working with mothers. He explained that workers were being overly optimistic about perpetrators of child abuse, dismissing the evidence to the contrary and in turn placing children at risk. The concept of 'the rule of optimism' links here to prior knowledge, violence and abuse as staff are reportedly putting themselves at risk and this could be the case because workers are overly optimistic about violent perpetrators, putting aside the fact that these clients are and have been violent in the past. Stanley and Goddard argue that little attention is currently paid to the workers' feelings of fear, anxiety or isolation at work. Interviews were conducted with a random sample of fifty child protection workers. Alongside this, information from case files of the fifty workers was gathered and examined. The study focussed specifically on the ability of the child protection system to protect children. The findings present that whilst four workers were assaulted by a person with a weapon and twenty-two workers received threats of assault, only nine were assaulted by another person. However, workers reported being traumatised by prior knowledge of violence, a lack of support and feelings of isolation. This study claims that hostage theory ('Stockholm Syndrome' – Nils Bejerot 1973) at least partially explains why some children who are under the care of protective services are not adequately protected and continue to experience abuse. Stockholm Syndrome is a psychological concept where individuals sympathise with their captors in some cases to the point of defending them. Here social workers may empathise with violent or abusive clients, leading child protection workers to make different case decisions in favour of abusers, or workers maybe choosing not to report incidents. Again, Stanley and Goddard's study relates back to previous research which suggests the 'rule of optimism' and

isolation are reasons for violence, whilst relationships shared with clients is suggested as a probable cause for underreporting.

Littlechild (2002) examined the importance of supervision and support from managers, focussing on the types of organisational response which child protection workers found effective in response to clients' threats and aggression. He draws on questionnaires, interviews and a review of relevant literature to provide a journal article illustrating issues within child protection services. The experiences and views of child protection workers and managers in relation to the management of violence against child protection social workers were examined. Littlechild (2002) found that social workers were seriously disturbed by displays of anger by clients even when they were not effectuated in physical attack. This directly impacted on the workers' effectiveness in practice. The impact of violence towards social workers was noted as negative. The emotional well-being of the workers was affected in the following way: workers felt a sense of personal responsibility and vulnerability, they shared feelings of incompetence and failure, of guilt, anger and shame and a sense of denial. These findings demonstrate the importance of the role of managers and agency support systems in dealing with such matters (Littlechild, 2002).

The importance of support and good management was a point emphasised in literature published during the 1990s. The findings directly align to the central points of discussion within this thesis. Littlechild demonstrates the potentiality of a link between the abused worker and poor case management. The relationship between an abused worker and poor case management is important when analysed with respect to high profile cases like Victoria Climbié's, as there are several cases where children who were known to children's social care have been murdered at the hands of their carers and in most of these cases the caregiver has been threatening, abusive or violent toward the child protection worker.

In 2003 Littlechild published a journal article on working with aggressive parents. This article focused on the types of violence prevalent in child protection work and the effects of these on workers. In this study, Littlechild (2003) reviewed interview data drawn from a sample of twenty managers in a large county council, and questionnaire findings from child protection workers from the same agency. This study found that there is a perception amongst staff that violence and abuse is increasing in practice, and that these issues are seen as part of the job. Littlechild (2003) reported that indirect violence is more common than physical violence, and that support and reporting of these incidents was lacking and inaccessible. He found that long term exposure to abuse effected workers psychologically. Littlechild (2003) argued that parents used

violence and abuse as a form of deflection, and to distract the child protection worker from the abuse they were inflicting on their children. The study found that inexperienced staff were more likely to be abused, and managers felt that newly qualified workers needed more support and careful supervision. It was also found that staff needed better training with a specific focus on dealing with difficult clients, violence and abuse. Littlechild (2003) concluded that councils needed to employ better policies around this issue, workers needed to be better supported and supervised and perpetrators needed to be challenged in the aftermath of an incident.

Following this, Newhill (2004) presented a comprehensive study based on the premise that social workers suffer violence due to two provocative factors; firstly, the care versus control dilemma and secondly, conservative social policies that don't sufficiently account for emotional and vulnerable clients. Newhill (2004) reviews existing studies on client violence and social work practice from the United States and internationally. In nineteen per cent of the threats reported, the client used a weapon in making the threat. Of these, "thirty-two per cent used guns, twenty per cent used knives, fifteen per cent used sticks, four per cent used more than one type of weapon and twenty-nine per cent were categorised as 'other', this category included items such as furniture, brooms...[etc]" (Newhill, 2004: 69). According to statistics from the 1980s and 1990s, social workers are more likely to experience threats of violence than a physically violent attack.

Broadhurst, Hawkins and Briggs (2004) also argue that violence, threats and intimidation confront many professionals working in the area of child protection. How violence affects the worker personally, their clients and cases and how violence is dealt with by management were of primary concern. To expose these issues, Broadhurst *et al* (2004) provided participants with a thirty-five item questionnaire inclusive of both qualitative and quantitative questions. The questionnaire was completed by seven hundred and twenty-one self-selected participants. The study found that eighty-four per cent of respondents were female, ninety-one per cent of respondents had experienced intimidating behaviour, seventy-two per cent had experienced threats of violence and forty-one per cent had experienced ongoing harassment. Twenty-four per cent had experienced actual physical violence. Furthermore the study states that sixty-three per cent of workers had experienced these incidents both when working with a colleague and when working alone; "children's needs were found to be secondary to those of appeasing the abusive and/or troublesome parent" (Broadhurst *et al*, 2004: 4). In some cases the child's safety was given a low priority. For social workers the most common working environment is the home of those with whom they are dealing. According to Broadhurst *et al* (2004) this poses a number

of practical challenges that are not present when the professional is operating on their own territory. It is noteworthy that when social work clients behave unacceptably, one of the sanctions applied is the removal of home visits meaning any future meeting must be held at the offices of social services.

In 2005 Littlechild produced an article looking at the nature and effects of violence in child protection work. He discussed the importance of managers and support. Littlechild (2005) argued that violence and abuse does have an effect on the interventions employed by child protection workers, and at times these effects left vulnerable children at risk. Littlechild (2005) explored the idea of working in partnership and concluded that partnership working is not always possible where workers are trying to assess risk, in some cases leading to court orders and the removal of children. Littlechild (2005) ultimately found that violence and abuse compromised worker effectiveness and all aspects of the role.

Later in 2005 Littlechild researched the stresses arising from violence, threats and aggression, against child protection workers. Littlechild (2005) found that staff retention was affected by violence and abuse in practice and the stress this caused staff. Littlechild highlighted the problem with a lack of definition of violence amongst academics and in policy. Littlechild utilised questionnaires (he received a twenty-five per cent response rate) and interviews (using purposive sampling) with staff and managers from a large council. He found physical violence to be rare compared to threats and abuse. Staff reported they felt violence and abuse were part of everyday practice and normal within child protection work. Littlechild (2005) reported that there is a lack of clarity as to how councils aggregated, in a systematic way, incidents of violence. Littlechild (2005) concluded that staff needed better inductions; most staff did not report abuse or threats; that long term experiences of abuse had a negative effect on workers; certain tasks carry greater risk and that workers need better supervision.

Waddington, Badger and Bull (2006) found that the threat of violence concerns most people most profoundly, wherever this is experienced. In recent years there has been a growing awareness of the workplace as a recognised site of violence, threat and danger for a significant number of people. The connotation of the word 'violence' does suggest some form of physical assault. 'Workplace violence' might, therefore, be imagined as "episodes in which employees are punched, kicked, or attacked with weapons. However, what people experience as 'violence' is not so narrowly restricted; indeed it covers a broad spectrum of hostile and other encounters that arouse feelings of threat and menace" (Waddington *et al*, 2006: 32). To examine this relationship between experience and definition further, Waddington *et al* interviewed fifty-four

Police, sixty-two social care professionals, twenty-two Accident and Emergency workers, twenty social workers, twenty mental health staff, four mental health professionals, five Accident and Emergency staff and six social workers. Those interviewed reported incidents of physical assault. Physical assaults normally consisted of punching and kicking, while workers were less commonly attacked with weapons. In the incidents where a weapon was used, these included a stool, a dog lead and an airgun. Social workers, especially those involved in child protection had a very similar relationship with their clients to that of the police suspects. Clients rarely entrusted themselves into the care of social workers. Much more commonly, the intervention of social workers was an unwelcome imposition, “a threatening intrusion into the lives of clients designed to serve the interests of a child or a wider public” (Waddington *et al*, 2006: 152). The study found that what distinguishes social work from Accident and Emergency staff and the Police are the long-term relationships built by the former with those whom they encounter.

Littlechild (2008) presented a study examining violence and abuse from a risk perspective. Littlechild argued that it was unrealistic to expect child protection workers to predict risk using current risk assessment tools. Littlechild (2008) found that these ‘unrealistic expectations’ meant that child protection workers were experiencing high levels of fear arising from risk agendas. The media were considered by Littlechild (2008) to be ignorant to practice realities like violence and abuse faced by workers, arguing that media reports of high-profile cases never include details of child protection workers being abused by parents. He developed this point further and argued that government policies are a knee-jerk reaction to media and public outcry; this is one reason why current risk assessment tools are ineffective. The study notes that risk does not just happen, and actuarial based assessments should not be taken to mean that individual events can be predicted. Littlechild (2008) concluded that risk cannot truly be eliminated, that workers can learn through mistakes, and that negative media reports can leave workers feeling fearful due to high and unrealistic expectations of the profession.

### The Twenty-First Century – Increase and Extent

Research conducted in the twenty-first century offers a detailed analysis of the current problem and its apparent increase in practice, and offers practical remedies within practice. Trotter (2006) and Bowie *et al* (2005) published studies relevant to the topic but neither study directly contributes to this thesis. Both studies highlight the use of weapons in violent threats as an issue for further consideration. Newhill (2004) contends that the consequence of being threatened or intimidated with a weapon can lead to long-term stress and absence from work. Seven of the twenty - two literature pieces were specifically relevant to the child protection

worker, four of which are representative of the United Kingdom. Studies from this decade found that social workers dealing with child protection issues have the additional problem that they are sometimes conveyors of bad news. However, none of the studies explore this issue further. Research to date fails to explore the idea that child protection workers are at a heightened risk of unpredictable violence due to the fact that they work in highly emotive and volatile situations. Where this is the case literature ignores the suggestion that violence toward the child protection worker negatively impacts the case and leaves the child in need as a secondary concern.

### **Strengths and Limitations of Existing Research**

Of the twenty - two studies which examine violence and abuse in social services, seven concentrate directly on violence against child protection workers. Interestingly, all seven studies were published from 2000 onward (Stanley and Goddard, 2002; Littlechild, 2002; Littlechild, 2003; Littlechild, 2005; Littlechild, 2005; Littlechild, 2008; and Broadhurst, Hawkins, and Briggs, 2004) possibly suggesting that there has either been an increase in violence within the child protection setting, or a recently developed interest in this specific area. Albeit exiguous, literature and relevant research in the field does explore violence and abuse specifically toward the child protection worker. However, claims that child protection workers are at greater risk and that the types of violence experienced stem from emotional outburst and are therefore unpredictable has not been considered further. When put into context with current child protection practice, research and literature, this topic warrants further research.

In this particular area of research, studies cited in the literature review can become repetitive, regurgitating those main findings of studies already published. The danger here is that old data and findings are taken to show the 'norm' years after research and publication. This is not to say that literature reviews as a methodological approach do not hold merit. In some cases this form of research provides an invaluable resource providing an historical narrative, which affords researchers and authors bountiful opportunity to critique and impress their own theories on a subject. However, when analysing violence in the workplace, in particular violence against child protection workers, it is difficult to provide a substantive representation of the extent, affect and experience of violence in practice. This difficulty is exacerbated by the fact that there are only seven academic studies focused on this particular group.

The questionnaires and interviews undertaken in an attempt to gather empirical data focus on small, predefined pockets of society and social services departments, thus the findings do not represent the entirety of the social work profession. This small representation offers an insight

into violence and abuse towards social workers. The suggestion that violence towards social workers is a predominant issue in the everyday lives of social workers provides incentive and need for a widespread questionnaire with findings reflective of the social work population.

In some cases the findings are not specific to the worker or setting. The findings could be generalised across all settings and for all workers. Each sector of social work is different. These intricate differences can lead to workers in certain settings being more prone to violence, abuse and threats than others. The methods used, especially those employed in the twenty-first century provide an invaluable resource. However, they lack the personal touch and an up-to-date analysis of current practice issues. With a lack of recent empirical research, there is little to no focus on the client or repercussions of violence on the case, client and/or family.

### **Considerations and Conclusion**

In current literature it has been argued (Waddington *et al*, 2006 and Norris, 1990) that to define violence excludes individual experiences and that setting a definition from the outset of a project can lead to a formal and structured approach to an intangible subject matter. In response to this discussion, this thesis will use an inclusive definition of the term 'violence'. This is necessary if the thesis is to offer a new working definition of violence and abuse to policy and practitioners.

Fundamentally, the thesis challenges the notion that social workers should tolerate violent behaviour as part of 'the cause'. Incidents of violence, however minor they seem, should be reported and workers should feel supported and protected within their working environment. This thesis also aims to challenge stereotypes constructed by the media and previous academic research, of the 'weak' worker, the 'provocative' worker and the 'incapable' worker. The study will offer ideas that can be implemented in a proactive attempt to train, educate and prevent violent attacks toward the child protection worker. Ultimately, changes made to reduce fear of and violence towards social workers can only affect the client positively, reducing child death caused by cruelty suffered at the hand of their parents. Studies to date have inadequately questioned the affect that violence or abuse have on decision making, case management, or the relationship between worker and client. Currently no link has been made between poor case outcome or child death and a worker threatened by a parent or child.

Safety concerns need to be made a priority within professional lives, whilst being careful not to impair the empathetic nature of social workers' relationship with clients. The removal of home visits is touched upon by Brown, Bute and Ford (1986), Lupton (1994), Weinger (2001), O'

Hagan and Dillenburg (1996). Although this issue features in numerous studies regarding workplace violence, it is not emphasised as being of concern or warranting further discussion.

It is reported in the literature, that social workers are unsure of their rights once violence or threats of abuse have taken place. Social workers are unsure of policy and guidelines that are there to support and protect them in practice. There seems to be confusion in practice as to how workers report and record threats, abuse and violence. In other literature there is suggestion that the social services departments themselves are not keeping record of such occasions (Norris 1990 and Littlechild 2005). The emphasis of this thesis is on change, the idea that change can happen, and that violence can be minimised, managed and prevented.

The problem of lack of national statistical data cannot be overcome within this thesis but a study that provides an analysis of more than one social demographic and council area can be produced. The methodological orientation of the thesis can support an in-depth review of the experience of the individual worker within practice, whilst statistically gathering evidence as to the form and frequency of violence. This thesis will now move on to examine how a number of theoretical perspectives have informed the study and linkages between theory and the literature examined in this chapter will also be developed.



## Chapter Two: Risk Theories

*“The concept of ‘the risk society’ draws attention to the limited controllability of the dangers we have created for ourselves. The main question is how to take decisions under conditions of manufactured uncertainty, where not only is the knowledge base incomplete, but more and better knowledge often means more risk” (Beck, 1992)*

### Introduction

The following chapter presents the theoretical concepts that inform this study. The literature includes underpinning theories that provide explanations as to why violence occurs in social life. A number of theories will be presented in this chapter and their relevance to the central research questions of this thesis will be evaluated.

The objective of this study is to better understand the personal and professional impact of violence on child protection staff. The study also reports on the impact of policy and procedures in managing violence and abuse in this occupational setting. To achieve this objective, the following chapter will present a comprehensive analysis of theories on risk. These theories will be presented as first, second and third order theories. First order theories examine overarching theories relating to risk, whilst second order theories relate risk to social work policy and policy discourse. Finally, third order theories examine risk from an individualistic perspective which relates directly to child protection practice and face to face interactions.

### Risk Theories: The Orders

The chapter begins with an analytical overview of the first order theories which can be utilised to assist with understanding society, institutions and risk. The work of Giddens (1971), Douglas (1985, 1992) and Beck (1992) will be presented in this section. These academics are the most acclaimed theorists on risk, and their work forms the starting point for many current authors. Their theories provide an overarching understanding of risk in society and the manner in which social institution perceive risk, as well as explanations on how human interactions link to the manufacture of risk.

Next, the second order theories which inform policy and risk discourse in social work will be examined. Kemshall (2009), Littlechild (2008) and Denney’s (2009) ideas will be considered as particularly informative in this area, as their work focuses on risk-related policy and organisational discourse. This provides a middle order (second order) understanding of risk, and

assists in the understanding of how first order theory impacts and translates on understandings of risk in the organisation.

Lastly, Social Learning theory along with Innate Aggressionist and Psychodynamic approaches along with considerations from the work of Freud (writing between the 1890s and 1930s), Bandura (1971) and Munro (2003) will be considered when exploring risk and face-to-face practice. This section looks to better understand the people who pose risk and how professionals perceive them. A coherent link between first and second order theories, with respect to the individual worker and client, will be presented. As the work of Beck theorises risk at all levels, his work will form part of the narrative in all three orders.

The contributions from the nine differing risk theories presented in this chapter will be examined against those of Beck's work. The strengths and limitations of the risk society will be presented to demonstrate how Beck's theory supports the central research question and a coherent theorisation of risk, violence and abuse in child protection work. After using the first, second and third order distinctions to review current and relevant risk theories, the chapter considers which theory would be best placed to underpin this study

The chapter will conclude with an overview of the theoretical issues and how these are relevant to child protection organisations, teams and front line workers.

### **Definition of Violence**

At the outset, the aims of the study were to better understand violence and abuse in child protection work (page 15); therefore it was essential to gain a clear picture of organisational perceptions, policies and procedures. In order to do so, the study used an institutional definition of violence. Ulrich Beck argues that risk is characterised by the agency, in their policies, procedures and day to day narratives; this provides further reasoning for the organisational definition. To define violence, the Directors of Social Services state that abuse is 'any violation of human or civil rights' (DoH, 2000). Whereas previous literature from the 1980s defines violence as a purely physical act, the definition from the Department of Health (2000) shows the shift of organisational understanding. This thesis aims to assess whether this change in perception is reflected in the policy, procedure and protection of staff. Therefore, as discussed in the introduction, this thesis has taken an organisational viewpoint, analysing how the organisation culture of social work impacts on the experience of the individual child protection worker.

The table below offers a visual representation of the theories which will be examined in this chapter and provides a summary of how theories of risk have developed over time, where they contribute to this thesis, similarities between theorists and any gaps in knowledge.

	Theory	Theorist	Definition of Risk	Key Themes
<b>Structural</b>  1 <sup>st</sup> Order	The Risk Society  Structuration Theory  Culturalist Position  Psychosocial Theory	Ulrich Beck  Anthony Giddens  Mary Douglas  Sigmund Freud	These theories define risk as a societal shift in focus. They argue that risk, rather than class, now defines society.	Post-modernist and Reflexive Modernisation  Experts and Knowledge  Uncertainty
<b>Policy</b>  2 <sup>nd</sup> Order	Social Work  Probation  Probation	Brian Littlechild  Hazel Kemshall  David Denney	The writers in this order believe that a risk society has now developed, a belief supported by the existence of insurance companies. These theorists examine the effect of risk on the public sector, in particular social services. Discussing the notion of risk and its predictability in practice.	Risk Assessments  Communication and Policy  Organisational Culture and Serious Case Reviews  Prediction and Prevention
<b>Individual</b>  3 <sup>rd</sup> Order	Innate Aggressionist  Social Learning Theory  Practice Lessons	Sigmund Freud  Albert Bandura  Eileen Munro	Same definitions of violence but different ideas on why people are violent. Nature or nurture?	Individualisation  Risk  Victim and Perpetrator  Practice Realities

The table above demonstrates that the first, second and third order theories all have key themes which run throughout. Giddens, Beck and Douglas all attempt to understand modernity, risk in society, organisations and ultimately conclude that these all result in mistrust and uncertainty for the general public. Second order theorists such as Denney, Littlechild and Kemshall have attempted to understand the relationship between the development of social policy with reference to the aforementioned first order theorists. They all argue in slightly different ways that policy is generally based on knee-jerk reactions from government and local authorities. This means that child protection staff must rely on resources that are insufficient and which evidence suggests are inappropriate. The third order theorists are more concerned with practice realities and individual narratives but do note that society and institutions to some extent shape individual reactions and behaviours. All the risk theories presented argue that either through choice or consequence we are now living in a society fuelled by risk and assessment. This leaves no doubt that the risk society exists; however, organisations and individuals are failing to adjust their systems and lifestyles to keep up with the new cultural demands that the risk society presents.

### **First Order Theories**

The key theorists discussed in this section are Anthony Giddens, Ulrich Beck and Mary Douglas. A brief description of their work follows, so as to present the background of their workings.

Giddens has influenced social science and public life rhetoric in Britain and throughout the Western world since the 1970s. His work started with a critique and appraisal of classical sociologists such as Marx, Weber and Durkheim. In the 1970s after his first publication (*Capitalism and Modern Social Theory*, 1971), Giddens started to rework traditional sociological theory by constructing his own social theory to suit modern times. This culminated in his 'theory of structuration' which attempted to theorise and explain human action, social systems and society. In the 1990s, Giddens took the core concerns of structuration and looked at this problem from a global viewpoint. He analysed the capacity of human subjects to act and reflect on their individual lives alongside social systems, questioning how much influence the individual has to shape both.

Giddens' work has also been tremendously influential on policy making, particularly during the years of New Labour. Like Beck, Giddens examined 'reflexivity' in an attempt to better understand how personal lives and institutions are shaped by

globalisation, changing environments, trust, risk and social relationships. Giddens developed this idea of 'reflexivity' and termed modern society as 'reflexive modernisation' suggesting that we are living in post-traditional society. In 1994, Giddens and Beck co-authored a book entitled 'Reflexive Modernisation', which was concerned with this idea of post-traditional society, individual emotions, political agendas, expertise, institutions and how all of these relate in society. Giddens argued that as knowledge became more reflexive and readily available to the public this in turn defined how people and organisations thought and acted within a post-traditional modernity (late modernity).

Mary Douglas has been an influential commentator for the socio-culturalist position. Douglas (1985) argues that risk is not a thing but rather a way of thinking. She infers that each community is typified by forms of authority, commitment and boundaries which should be duly noted in risk assessments. These factors influence the determinant of how risk is acted upon.

These theorists' work will be examined below, under the sub-headings society, institutions and knowledge – the key themes that they discuss.

### Society

Beck frames the concept of risk within a historical narrative. Broadly, there are three distinctive epochs: 'pre-industrial society' (traditional society), 'industrial society' (first modernity) and 'risk society' (second modernity) (Mythen, 2004). The basis of Beck's argument is that changes in the formation of risk, associated with major structural transformations, have facilitated a transition from pre-industrial to industrial modernity and finally into the risk society. Unlike in the Industrial era, dangers cannot now be limited by time, space or person; risk and hazards can affect future generations and are international. The risk society therefore allows social institutions, such as social services, the freedom to characterise and assess risk whilst encouraging individual participation. If risk can affect future generations then an understanding of the form and frequency of violence and abuse at an institutional level is needed to ascertain the threat to current and prospective staff.

Beck sees another dimension to societal development, especially in those roles assigned to science and knowledge. Beck (1995) argues that knowledge is vital to

assessing, preventing and managing risk. 'Experts' who are knowledgeable have power over social actors who depend on them for information, resulting in a hierarchy. In social services, there are two levels of experts. Firstly, there are directors of service and government policy makers, upon whom the social worker is dependent information and policy formulation. The secondary expert is the trained and qualified social worker who holds expert knowledge over the service user. In practice, this can lead to tensions within an organisation. Those experts who decide the legislative boundaries within which child protection workers practice, could be adding to the frustrations, that provoke violent responses from clients. Therefore this thesis to a certain degree contributes to Beck's theory, and later aims to draw out the tensions underpinning this hierarchy of power and evidence with cases of best practice. An effective dissemination of knowledge needs to take place between experts (directors of service), child protection workers and service users. This action could redress the power imbalances that are present within institutions like social services and the tensions that lead to violence and abuse.

For Beck, the concept of risk "unlocks and defines the essential characteristics of modernity" (Mythen, 2004: 6). Risk, too, defines the 'essential characteristics' of child protection agencies. In the risk society, ideas of the broader relationship between humans and the environment are examined alongside institutional change and its effect on social experience (Mythen, 2004). In this sense, Beck's theory is relevant to the argument presented in this thesis. Since the modern creation of social services in the 1970s, the organisational approach has changed. Child protection work is now purely focused on risk and protection, and outside voluntary or non-statutory agencies now undertake the needs-based, charitable work that used to characterise social work (Sagepub, 2005). Beck suggests that these characteristics, changes and interrelationships (in this case within social services) can all essentially be reduced to risk. By reducing societal cause and effect to risk, Beck argues that risk dominates all social movements. Giddens (1993) supports this, arguing that risk can be found within forward-looking societies, in particular a society where legislation is based on inspiring future improvements rather than stagnant tradition. For child protection workers, legislative moves toward improving organisational support and supervision would positively impact on their professional practice and service delivery.

Currently, 'stagnant' policies may mean that workers are at risk, but moreover, that children are still being left in abusive homes. An example of stagnant or traditional policy is the removal of home visits. The removal of home visits was cited in the Laming Report (2009), following Victoria Climbié's death, as one of the major faults in the case approach. Home visits, both scheduled and unannounced, are now a legal requirement for practising social workers. However, according to the findings of this study, the removal of home visits is still used as a precaution.

Giddens (1993) and Beck (1992) argue that risk can be positive when calculated chances are taken with respect to the economy and lifestyle changes. In child protection, workers are asked to assess risk within families and balance the strengths of the family, protective factors and support networks against the negative impacts of the risk. The idea that 'everything' can be reduced to risk in many respects reflects current professional practices within social services. Despite this, children still die in the protective care of social services whilst professional child protection workers are murdered and violated at work. However, it is how social services build policy around this principle that is key. Moreover, communicating these policies and procedures between expert and social actor is vital. Child protection workers may be aware of the risk, but are they also aware of the procedures in place to protect them i.e. lone working policies or reporting procedures? In a pressurised attempt to assess risk to the child, is risk to the worker minimised by individual workers and social services organisations? If 'everything can be reduced to risk', does this normalise violence and abuse and lead to underreporting in practice?

In an attempt to define a new form of modernity, Beck does not judge class or status to be a key determinant of the social life experience: "The driving force in the class society can be summarised in the phrase 'I am hungry'; the driving force in the risk society can be summarised in the phrase 'I am afraid'" (Beck, 1992: 49). This is reflected in social service agencies that have moved from needs-led assessment tools to the preventative risk assessment, which is used for both the professional and service user alike. According to Kemshall (2001), individual child protection workers are criticised for over or under-assessing risk. They are expected to assess risk and make decisions when there is no generic or institutional code to support workers in deciding whether the child's needs or parent's rights are paramount. Beck states that there is a universalising process of distribution which has loosened ties on class-based identities.



Where Beck talks of catastrophic risk, be it nuclear, environmental or global, these affect everyone indeterminately, regardless of wealth, status or class. However, for the service user, poverty and environmental factors increase the likelihood of crime, neglect and substance misuse. The idea that certain social groups are disproportionately more likely to pose a risk to the agencies designed to help them is supported by the Department of Health's report that the 'exposure to risk' for the child protection worker is eight times higher than in any other profession (DOH, 2000).

Within the risk society, the popular news media is a means whereby reality is socially constructed. The media manufactures risk stories and upholds fear of risk by consistently publishing narratives of negative risk situations (Denney, 2005). It could be said that Beck emphasises the divide between the lay public, media reports and experts working within social institutions. This is epitomised in the separation between social and scientific rationality. However, Beck fails to recognise that ideas and values are publicly generated as well as institutionally disseminated, with lay and expert groups interfacing, rather than acting within fixed boundaries (Mythen, 2004). This study aims to gauge the extent to which 'social actors', in this instance child protection workers, form their own perceptions of risk. The methods employed within this study aim to assess whether prior knowledge from institutional databases, the media, managers or hearsay influence workers in practice. Individual perspectives of fear and anxiety with regards to prior knowledge will also be explored.

Risks raise questions of responsibility for consequences and methods of precaution:

"The concept of risk refers to those practices and methods by which the future consequences of individual and institutional decisions are controlled in the present. In this respect, risks are a form of institutionalised reflexivity and they are fundamentally ambivalent" (Beck, 2000: xii as cited in Mythen, 2004: 15).

The process of modernisation as protected by the welfare state de-traditionalises ways of living. Working and living forms of the industrial society, for example the nuclear family, are dissolving. In turn, the foundations of a class-based society have shifted, leaving a society less protected by the welfare state (Beck, 1992). People are set free from 'ordained' ways of life. This coincides with the loss of historical consciousness in individual forms of thinking, living and working. The individual is expected to cope, and as a result, sooner or later demands will be made of institutions to provide education, therapy and counselling to help individuals do so (Beck, 1992).. Social services and charitable organisations are already exposed to the most vulnerable and volatile

members of society and the movement away from ordained ways of life means that social workers are increasingly working with families who have multiple and complex needs. Meeting the demands of the 'complex' service user as well as completing statutory duties can lead to workers suffering from stress or managing working relationships inadequately.

There is little acceptance in the risk society thesis that a person's race, gender, sexuality, disability or poverty puts individuals at greater exposure to risk, even though it is apparent that the above demographics can mean that you are less able to defend yourself against the effects of risk. For example, families who do not have the finances to heat their homes during winter are at greater risk of becoming unwell. Another example is those who experience segregation and hate crime in their communities due to their sexuality or race. Therefore, as previously argued, it would be imprudent to reduce all of society to a matter of risk. In the case of child protection work however, the approach is indeed reduced to risk and its management. Social work organisations engage predominantly with families living in poverty; but then they are intended to offer a service based on risk rather than need. There are universal (tier 1-2) services offered to communities based on need, leaving specialised services (tier 3) to focus on risk and protection.

The socio-cultural theory has several differing dependencies; one being the specific area or context within which the individual is situated: "In these works, Douglas focuses upon the impossibility of a form of analysis which does not take into account the uniqueness of the community in which the perceived risk occurs. Each community is typified by forms of authority, commitment, boundaries and structures that determine the manner in which risk is constructed and acted upon" (Denney, 2005:22). In child protection cases, there are indications that these issues occur more regularly in certain areas and communities – one must be aware of this when protecting themselves against violence and carrying out a risk assessment. It may not be the client by whom one is threatened, but others in the local vicinity. The cultural background and the client's place within their community are therefore two important concerns when assessing and preventing risk.

### *Reflexive Modernisation*

When Beck talks of moving 'towards a new modernity' this means completing three stages: pre-modernity, simple modernity and finally, reflexive modernity (Mythen, 2004). Child protection workers establish a close working relationship with clients, one that challenges lifestyles whilst encouraging positive change. The code of practice regulating social work (National Occupational Standards for Social Work, 2002) expects social workers to empower their clients by informing them about their rights and entitlements, "actively listening to what they have to say; involving them in decision-making; recognising their expertise; enabling them to be empowered to represent their views and empowering them in decisions which affect them" (NOS, 2002: 4). Enabling clients to have choice and control over what is provided and how has been part of the Government's 'modernising social services' agenda for the last decade, and has resulted in social services moving away from their 'paternalistic caring' model towards a 'partnership working' ideal. This also means services are less inflammatory as they avoid the "care versus control" dilemma. This empowerment reflects the ideals of Beck's reflexive modernisation, resulting in the reflexive distribution of power from the institution, in this case the child protection worker, back to the service user. Social agents thus become individualised and are less constrained by structures. A feeling of control and choice for the client can lead to a better working relationship, where abuse and violence no longer feature.

Western cultures are being steered towards a more distinctive form of reflexive modernity where, according to Mythen (2004), individuals are taking more responsibility for the consequences of their choices, behaviour and conduct. "This refers to the way in which patterns of cultural experience are uprooted by underlying changes in social class, gender, the family and employment" (Mythen, 2004: 17). With this, individuals are scrutinised by institutions about their lifestyle choices, professional careers, how they raise their families and spend their money. This is where institutions like social services become involved. Social care has grown from an industrial society with church-run charitable aid, to a governmental organisation with a legal duty of care to vulnerable adults and children. This agency is obligated to investigate and make decisions in relation to vulnerable people, as well as question the personal lives of families who are deemed to be neglecting or abusing relatives.

Inherent within this change lies distrust, anxiety regarding the unknown and uncertainty toward the new. Technical experts within the agency have sole power to define agendas and impose their own foundations for risk discourse within their institution. Trust has been proposed as crucial in working relationships for years, yet this proposal has met resistance. Without fundamentally questioning the forms of power or social control involved in institutions, power hierarchies and archaic systems will remain. So how do social actors build trust with professionals? Do the lay public understand what it means to accept support from social services? Are they aware that social services aim to work in partnership with the family rather than in a dictatorial role? Over the last fifty years, the mass media has been recognised as a primary source of public information about risk (Ayre, 2001): "In contemporary western cultures, media portals act as important sites of knowledge, advice and debate" (Mythen, 2004: 74). Along with the findings from this study, Mythen (2004) found that since the late 1980s, the media have increasingly printed stories focused on risk, intensifying a topic of concern and underlining a risk-averse society. The media rarely print positive reviews of social service delivery – more commonly, tabloids suggest that social services pose a risk to its public users, as evidenced by its failings with cases such as Victoria Climbié and Baby P (Littlechild, 2005 and Jenkins, 2009). In dramatising such extreme adversities as child murder and abductive social workers taking children into care, the media, largely the tabloid media, encourage the development of moral panic, over-sensitising people to the risks involved.

Giddens emphasises the manner in which the trustworthiness of experts and knowledge is persistently questioned by the public, media and other experts. Adding to Beck's agenda on risk and society, he introduced the idea of manufactured uncertainty – pointing to the fact that risks are often created by expert systems themselves. Public anxieties and trust in child protection professionals heightens when there are reported cases child deaths where the professionals involved 'failed' to keep children in their care safe from harm. News stories about cases which demonstrate child protection workers failings show professionals and clients that this 'expert system' cannot guarantee safety. It also reiterates that staff safety cannot be guaranteed either. This manufactured uncertainty is managed by the development of new procedures and rules which staff are expected to implement in their practice to address past failings. For example, Local Safeguarding Children's Boards were set up to manage serious case reviews. These highlight gaps in knowledge, aim to learn from past failings and ensure

these do not happen in the future. Reflexive modernisation, according to Giddens, introduces experience of security, danger, chaos and control into society which in turn lead to an anxious, risk-laden sensibility in modern citizens. People are now compelled to build their own life stories with freedom of choice. This is where social services are now needed in society where, as Giddens terms them, 'fateful moments' (Gray and Webb, 2009) occur and the vulnerable, abused or traumatised need help with this 'life planning'.

With respect to the central discussion of this thesis, the role of social services as an agency and in turn the independent role of the child protection worker can be reduced to risk. The worker's role in practice is to ask 'to what extent is this child at risk?' It could be argued that the very existence of child protection teams is reason enough to see that reflexive modernity exists. This thesis aims, as was stated earlier, to examine whether social workers are a personified example of what it means to live in the risk society as defined by Beck. As part of Beck's reductionist ideals, institutions such as social services are a demonstration of the risk society in practice. If this is true, the study then aims to assess whether the fear and anxiety experienced by workers, heightened by this theory of risk, results in unrealistic expectations of child protection workers. For example, are social workers disengaging from practice because they feel pressured to accurately predict what an emotional client will do next? This pressure could identify why there is apprehension about reporting incidents of violence and abuse. However, according to Beck, violence can be predicted to an extent. Without appropriate support and without open dialogue, social workers may be reluctant to discuss issues with management in an attempt to avoid looking ineffectual in practice.

### Institutions

Giddens' aim with structuration theory was to overcome the classic sociological problem of the relationship between the individual and social structures and how these both shape institutions in everyday life. Giddens was particularly concerned with how sociology had assumed a view of human subjects which disregarded their individual make-up and portrayed them as constrained by social structures. Giddens argues that structures are made up of human actions within which people draw on rules and resources, contrary to sociological thinking which suggests that social structures are simply there to control human ways and are applied to humans rather than made by them. This theoretical framework can be seen to fit many organisational structures; for

example it has been applied to nursing, highlighting how inter-professional relationships are governed by rules and resources but only hold true meaning in everyday service delivery. These ideas could be applied to social work and to child protection work in particular. Risk presented to child protection workers on a daily basis appears to be overlooked by organisations and, as this study has found, is an area which needs more examination in the academic field. The problem could be, with reference to Giddens' ideas, that the right rules and regulations are not in place and therefore actual risk to child protection workers is not understood, resulting in inadequate policy and front line workers being put at risk. Therefore, Giddens believed that rather than focusing on the traditional dualism of a split between structure and agency, focus needs to be given to 'the duality' of structure. This is not to say that Giddens did not recognise that this duality can be both enabling and constraining (Gray and Webb, 2009). If looked at in the child protection setting, this could mean that front line workers have more of a voice when deciding policy and procedure. An area for consideration might therefore be how this is communicated to staff and how their voices can be better heard by the agency.

For Beck, the shift in modernity toward the risk society means that there is also a shift in society's stereotypes. Risk is not calculable, thus according to Beck there is no longer a divide in society based on poverty, education, class or environment. However, when considering the form and frequency of violence and abuse toward child protection workers, there is a disparity when comparing this profession to others (DOH, 2000). So if class is not the divider and risk is, why are social workers at greater risk than other professions? Furthermore, why are there clear and distinct differences between gender experiences of violence and abuse, with female social workers suffering the majority of verbal and sexual abuse, and male social workers suffering the majority of physical attacks at work (Lupton and Gillespie 1994)? Beck maintains that risk poses the same level of uncertainty to the wealthy and 'distinguished' groups within society, but he also acknowledges that risk is not equally distributed and in certain scenarios can be disproportionate. This is reflected in the aforementioned statistic that social workers are 'eight times' more likely to be physically attacked at work (DOH, 2000). This thesis aims to assess the extent to which child protection workers are experiencing violence and abuse. This assessment will go on to inform policy and also gauge the relevance of Beck's theories to the institution of social services.

Beck writes that distributional logic governs the provision of “positive goods such as health, wealth and educational opportunities and negative bads such as risk, infection and disease” (Beck, 1992: 23). The opposition between the class (industrial) society and the risk society is based around a distinction between shortage and insecurity. There are global risks that affect everyone, for example a global economic crisis; alongside these, there are societal risks which mean certain sections are more vulnerable. Child protection workers, as part of their role, are exposed to service users who may have a history of violence, mental health issues, and substance misuse and so on; therefore aligning this thesis to Beck would suggest that workers are at greater risk due to distributional logic not class divides.

Whilst industrial societies are characterised by said shortage, the risk society is distinguished by insecurity (Beck, 1992). Insecurity arises from a loss of social thinking. There is a large gap between expert knowledge and social thought and society has become dependent on qualified expert judgement to determine risk objectively. Within social services, there is a hierarchy of experts, so that risk is determined objectively. This hierarchy starts with the individual worker, who then reports to their supervisor; this supervisor reports back to the manager and the manager has a direct line of contact to the directors of service. Social institutions such as social services are in place to alleviate fear and provide a universal service regardless of wealth, class, age, race or gender. Social care provides a welfare service to deal with average risks that are socially unequal in distribution. Child protection teams are also socially unequal in their make-up as there are a higher proportion of women in the workforce.

To illustrate the disproportionate distribution of risk, Beck (1992) uses the term ‘boomerang effect’. Risk displays a social boomerang effect in diffusion, transcending boundaries of class and nation, so that even the rich and powerful are not immune to it. In these terms, no individual worker is at greater risk than any other. Risk is posed to the institution and is then disseminated, with certain teams being at greater risk. According to the boomerang effect, risks posed to the child protection team mean that no individual worker is safer than the next. Sooner or later the perpetrator and victim become identical. This ‘boomerang effect’ can be seen in child protection cases. It has been observed that children who live in poverty are more likely to suffer neglect or make poor lifestyle choices due to environmental effects. However, for Beck, because child abuse occurs across all cultures and nations, the boomerang effect suggests any

child, poor or wealthy, is at risk of abuse. The same can be said for the child protection worker. The boomerang effect and Beck's ideas of risk distribution could mean that geographically workers are at more risk in certain areas. Whilst a worker may fear a certain council estate more than a privately-owned secluded property, the worker in reality according to Beck's (1992) 'boomerang effect' is just as likely to be abused or violently attacked by a client. Thus social workers may be eight times more likely to be attacked but this statistic used in correlation to the risk society does not determine who the likely perpetrator may be.

The emergence of boomerang effects signifies that previously defined boundaries between those who gain and those who lose from risk have been blurred. As the production of manufactured risk increases, the distributional logic within society transforms: "The experience of contemporary risk is not simply about fear at a distance. Rather, a fleet of risks have seeped through into everyday experiences of work, friendship and the lived environment" (Mythen, 2004: 29). Child protection workers work with those disproportionately affected by risk distribution, meaning they themselves are exposed to a 'fleet' of risks when challenging potentially violent perpetrators.

Institutions operating in the risk society must be anti-discriminatory in approach and accessible to all members of its community. Child protection teams offer a free service (funded by tax), which aims to assess and review the needs of a family, working to empower them to function independently of experts. The concept of the risk society looks at how risks and hazards systematically produced as part of modernisation can be prevented, minimised, dramatised and channelled. To build trust and dispel uncertainty as the promise of security grows with risk, these assurances must be reaffirmed to a critical public through real intervention. According to Mythen, there is a pool of knowledge which exists to aid us in understanding how to better regulate risks. This is evidenced "by the applied practices of health and welfare systems, environmental agencies and insurance companies" (Mythen, 2004: 16). The 'boomerang effect' does not directly apply to social work practitioners because they are working with high-risk clients i.e. criminals, perpetrators of domestic abuse and substance users. The boomerang effect only applies when discussing the team, as everyone in the team is equally vulnerable to risks posed by their clients.



Form and frequency of violence and abuse in this chapter have been aligned with Beck's concept of risk distribution. Beck believes risk distribution to be random, as its form can be predicted and measured but who the victim will be is arbitrary. This correlates with the idea that there is a disproportionate probability of violence in the child protection setting due to the nature of the profession. This thesis works on the basis that staff can be protected against various forms of violence and abuse and as such the findings will make recommendations for policy. The chapter now moves on to discuss the risk society, the experience of child protection workers and how this affects reporting in practice.

### Experts and Knowledge

To overcome these issues, Beck proposes a reflexive learning process. This process would recognise the conditions underpinning expert conclusions and examines these with the benefit of different forms of knowledge held by people other than the so-called 'experts'. For example, where concerns are raised regarding a parent's capacity to care for their children, they should be given the opportunity to have their first-hand experience taken into consideration. In practice the CAF (Common Assessment Framework) is utilised to gather a holistic picture of the child's life, rather than detached 'experts' making decisions from afar that will ultimately impact on family life. The CAF does not simply focus on the individual experiencing problems but is designed to incorporate the views of everyone in the family. The reflexive learning process means negotiation between different epistemologies (science, medical, historical); in this case social sciences and sub-cultural forms, amongst different discourses between the child, parent and social worker. The questions here are: How can institutions adapt procedures and self-presentation in order to secure or repair credibility? Can institutions such as social services and the government incorporate staff in policy-making procedures and decision-making boards? Are these somewhat outdated institutions ready to adapt the reflexive learning process recommended by Beck? There are some examples where this is already happening in practice. When interviewing prospective students for a social work course, in some cases the board of interviewers is made up of a lecturer, head of department, current student, social worker and service user. If this example were used in practice it would reflect the ideal process of reflexive learning within the risk society, especially for the lay public who are reliant on expert panels or boards for the alleviation and prevention of risks.

The historical passage from tradition to modernity was supposed to offer total freedom based on rational, enlightened self-interest. Post-modern critique would argue that modernity imposes constraints of a traditional kind, which are culturally imposed and not freely chosen. For example, identity, ideology, constructions of risk, sanity and sexual preference still hold cultural and historical prejudice. Beck would defend that reflexive modernisation does exist in these spheres. Structural change in the private sphere results in the individualisation of social agents. These changes within society change the cultural structure of communities. For example, whether or whom shall I marry? Whether I should have children? What is my sexual preference? Individuals are then free from structure and able to reflexively construct their own biographies. Even in the workplace, individuals have the freedom to reflect upon and flexibly restructure the rules and resources of the workplace and leisure time (Mythen, 2004). This flexibility to restructure could enlighten reporting methods and procedures. Structural changes in the workplace respect the individual's right to choose whether they want to follow the 'rules' and report violence or not. However, do they encourage transparency? Accident and Emergency departments have a 'Stop. Full stop' policy; why then does the nature of the child protection role within social services suggest that violence is acceptable? Norris (1990) and Weinger (2001) highlight 'tolerable norms' as a reason for underreporting, as well as policy makers who are slow to create change.

The socio-cultural understanding of risk and society is evident in the initial assessment framework which takes into account environment, culture, social identity and family background:

"Douglas separates herself from individualistic interpretations by insisting that risk is not an objective, measurable concept, but is socially, culturally and politically constructed. Here risk can be seen as equivalent to being sinned against, since it implies being vulnerable to events caused others" (Denney, 2005:22).

The social worker entering a home where domestic violence is prevalent needs to command a background understanding of that particular familial, cultural, and community setting. This then needs to be analysed with a view to the families' appreciation of their situation and the support networks within which they function. The socio-cultural perspective holds fortitude in practice assessments as it recognises the need to be inclusive of not only the individual but those aspects surrounding an

individual which can either hinder or protect from risk. Thus it is and should be a key consideration in any risk analysis.

### *Knowledge*

Beck believes that risks are no longer perceived as fated and avoidable accidents visited upon society by nature. Instead, in contemporary culture, risks are related to human actions and decisions. Reflexive modernisation, risk assessment and management are entwined with biographies. This means that the individual is not only dependent on expert knowledge but is also personally responsible for how they digest and choose to act on this information. Furthermore, individuals are responsible for keeping themselves informed on, for example, the latest food hazard or natural disaster. Social workers are responsible for sharing information about clients. Effective multi-agency communication is crucial to professional knowledge and reflexive learning, as well as for the protection of both service users and staff. Child protection workers are responsible for keeping up-to-date case records, and for their personal information, checking central data systems. Beck's concept of knowledge demonstrates that those with knowledge hold the power to predict and prevent risks from occurring. If knowledge is not shared, then this can leave other social actors at increased risk.

Risk assessments can only be a useful tool if they are used and shared appropriately. Littlechild (2008) argues that current risk assessment tools are inadequate and furthermore that it is unrealistic to rely on these to predict risk. This thesis aims to examine communication within institutions. Bearing in mind Beck's discussion of the concept of knowledge, information needs to be filtered down through institutions from the expert to the worker and finally to the service user. If this does not happen effectively, then those without knowledge could potentially fall victim to violence and abuse in practice. With open communication comes the ability to encourage workers to report violence and abuse. Again, this questions the level of transparency within social services; for example, is the Data Protection Act (1998) understood in practice, which is there to protect the confidentiality of service users. However, in the majority of serious case reviews social workers have been criticised for not sharing information. No review to date has reprimanded social service agencies for sharing too much information between relevant professionals.

Experts and social actors can predict and prevent risk to some degree. However, there is still a level of uncertainty when discussing risk: “For example, the accident which is taken on its own to be random and unavoidable can be treated as predictable and calculable” (Mythen, 2004: 55). This is true in the child protection setting. The literature reviewed in this study demonstrates that there is underreporting of violent and abusive clients within the profession. How then can other professionals be protected? Violence and abuse are accepted by workers as simply part of the job. When the individual ignores these incidents, it results in institutions having to assess and legislate blindly. With relevant information gathered from accurate reporting, the number of incidents during the next year can be predicted, leaving ‘who will be involved’ as the only unknown.

Beck believes that knowledge is crucial within the risk society and those with knowledge hold power over those without. Understanding risks and risk discourse gives the social actor an educated ability to proactively and appropriately prevent risk. At the level of risk perception, advancements in knowledge have failed to result in a more secure social climate. In matters of risk it would seem that the more we know, the less we understand. Individuals are living comparatively longer and healthier lives, whilst simultaneously feeling less safe and secure. Mythen states that Beck considers that there are key institutions which are implicated strategically in hazard detection, such as: the government, science, law and the mass media. With positions of authority come issues of trust, responsibility, power and abuse. Societal institutions hold immense power over the lay public, which is dependent upon them for up-to-date and accurate knowledge. People with knowledge such as social workers are therefore in positions of considerable power. Child protection workers have the authority to change people’s lives; they can remove children from parents or support families to stay together. Thus the service user is reliant on the professional holding the power to be understanding, empathetic and anti-discriminatory. It is up to the supervision and management of the institution to oversee that workers do not abuse their power or practice in a prejudiced manner.

In this way, individuals are victimised as society becomes increasingly reliant on experts for knowledge and reassurance. Society does not choose the expert, the expert chooses a victim, in that victims are dependent on experts for knowledge. Class positions mean ‘being determines consciousness’, whilst risk positions mean

'consciousness (knowledge) determines being'. Losing a job is an event that is evident for everyone affected, and is not determined by who possesses knowledge. However, whether DDT is present in tea is determinate on knowledge and as such not determinable by an individual's cognitive means (Beck, 1992). Therefore, risk experts have the power to tell us what to fear. The experts dictate everyday practices; they determine what a risk is and what is not. Therefore, risk experts determine child protection workers' consciousness of violence and abuse, in turn subconsciously establishing what workers consider worth reporting. They also decide how, when and where a worker practises in relation to knowledge of risk, for example the removal of home visits and lone working policies.

While Giddens does not directly use social work as a topic of discussion within his theories, like Beck, he does examine structures. Critiques of Giddens state that structuration is problematic because it does not recognise power imbalances between structures, agencies and people (Gray and Webb, 2009). In social work, this might suggest that clients have the same power of autonomy as the social worker, police officer or judge, which in cases of protection we know not to be true. In fact as found in the literature review, it is when child protection workers are exerting most power that they are at heightened risk from clients. It was suggested in literature and supported by the findings of this study that child protection workers were at significant risk of harm when attending child protection meetings, court and during the removal of a child. The very nature and purpose of social work means that there will always be a power imbalance; making this explicitly clear rather than sending messages of 'partnership' and 'equality' with clients might serve to be more productive in keeping front line staff safe.

Within his work it has been argued that Giddens simplifies notions of power and social regulation and overemphasises the individual's ability to shape their own lives. This study recognises that the voices of individual social workers are not being heard. Even in cases where social workers have been murdered, little is being done to change the risks involved in everyday practice. When a child dies who is known to services there is a serious case review, and lessons are learnt, more often than not translated into new policies and procedures. When social workers are attacked, in some case left with long term debilitating illnesses, signed off for lengthy periods of sick leave, or in some cases murdered, few lessons appear to be learnt? To date, there have been no significant

changes to policy and procedures for staff working with violent and abusive clients in social services departments, which leads to individual staff members feeling as though they are not heard by managers, directors or government. However within this study the focus is on worker safety and therefore it may be beneficial to look at how social workers can have a stronger voice or more influence in the structures that are supposed to protect them.

To deal with the insecurities and uncertainties that the modernisation process introduces, Beck believes that modernisation should be reflexive, meaning that it is up to the individual as well as societal institutions to assess, manage and characterise risk. This is a key consideration in this thesis. To work more cohesively, the relationship between institutions, in this case social services and the individual child protection worker, could borrow from Beck's theory.

### Critical Evaluation

Those writers who support the notion of a risk society believe that the move to a post-traditional society means that risk discourse has led to the development of western society as it is today. Therefore risk can be seen as a positive and driving force according to Denney's analysis. Taking risks can have positive connotations for society like, for example business entrepreneurs who take risks and create in some cases global change, scientists and inventors who without risk would not have travelled to the moon or discovered essential medical cures. Risk can also be seen as a positive driver for individuals who enjoy 'daredevil' activities like parachuting or bungee jumping. Risk reflects as noted by Denney the quest to create change, wealth and discovery (Denney, 2009). However, looking at risk as a positive force still denotes in essence some exposure to danger, chance, misfortune or harm. It is important therefore to make the distinction between what is perceived and what is real. Even with positive outcomes, the term risk still holds with it an uncertainty linked to the unknown.

According to Beck the risk society is "a systematic way of dealing with hazards that are induced by modernisation" (Beck, 1992: 34). Key to Beck's argument is the distribution of risk and the knowledge of experts. If power were more evenly distributed and a positive communication technique were employed, tensions within the client - worker relationship could be reduced. As we move toward what Beck has referred to as 'reflexive modernisation' with a reflexive learning process at its core, an understanding

could be built into the systems that dictate how risk is managed, assessed and understood. If we move towards a truly individualised process of working where social actors are accountable for their actions, reflection on personal decisions could help prevent negative outcomes.

## **Second Order Theories - The Development of Policy in Relation to Risk**

Social policy can be seen as an institutionalised response to society's problems. The term is used to refer to several policies which have been developed through the state and related institutions, in response to what are perceived by a number of social actors including the media, pressure groups, citizens and government to be problems within society. The law forms the basis of social policy via acts set out by Parliament. These filter down to government agencies, at local and national level) who create policies for agencies and organisations including the care and protection of children. In turn social workers carry out their day-to-day duties based on prevailing law and policies prevalent in society (Thompson and Thompson, 2008).

A number of writers have sought to analyse risk with respect to the development and impact of prevailing child protection policies. The work of Littlechild, Kemshall and Denney will be used to illustrate different policy approaches to risk.

### Policy

One important consideration is that risk is not experienced in the same way by everyone (Denney, 2005). Some risks are predictable and therefore manageable, but equally some risks are not. Child protection work is mainly about managing risks, both known and unknown, as staff are asked on a daily basis to predict risk and in most cases predict the unpredictable (Littlechild, 2008). Experienced practitioners therefore use theory, serious case reviews and research to evidence the likelihood of risk and the repetition or likelihood of repeat abuse. Based on this, workers then have to assess whether this likelihood and exposure to risk can be managed in the home and monitored or whether the child needs to be removed for their safety. This is not, as Beck argues in the risk society, an exact science. Beck (1992) suggests that experts hold knowledge greater than individuals, whilst other theories question how child protection workers can possibly be experts on human nature.

Without question the issue of risk is present in the daily life of child protection workers, both in terms of personal risk and with respect to the child in need of protection. Risks are defined by Beck (1992) as the probability of physical harm due to a given process. For Beck, physical risks are always created and affected in social systems. For example, organisations which are supposed to manage and control risk could at the same time be creating risk. Beck therefore relates the magnitude of physical risks directly to the quality and functions of social relations and processes.

A key objective of this study is to determine whether management of 'risky' situations i.e. lone working and home visits, is appropriate and sufficient. In this instance, child protection workers are asked to enter potentially volatile situations alone. The organisation is then responsible for the process (home visits) and accountable for the effective management of the activity. The primary risk is the individuals 'dependency' upon institutions. For example, the worker is reliant on the institution to provide appropriate training, working conditions and effective supervision, which should include institutions ensuring workers hold a manageable caseload. The secondary risk is the social actor, in this case the affected child protection worker placing 'trust' and personal safety in the hands of an 'expert' who may be obscure and inaccessible. Thus the child protection worker is dependent on the institution's policies and procedures, for example the lone worker policy. Completing the home visit alone, as dictated by those managers who are seemingly 'living in an ivory tower', would be the final risk (Beck, 1992).

Social workers are asked to place faith in 'experts', many of whom have never faced the fears and consequences that their staff experience on a daily basis. This study aims to assess whether the processes in place heighten risk, by measuring institutional assessment, prevention and management procedures.. Beck (1992) believes that fear and anxiety within society stem from the potential for a hazard to occur on such a scale that action afterwards would be futile. The centre of risk consciousness lies "not in the present but in the future, thus the past loses the power to determine the present" (Beck, 1995: 34). Thus risks essentially express a future component. Although there are some hazards that are real today, for now the focus will remain on this future 'component' Society becomes active today in order to prevent, or take precautions against the problems and crises of tomorrow. The Health and Safety at Work Act (1974) and the further regulation, The Management of Health and Safety at Work Act (1999), charge institutions and employers with the legal responsibility of the wellbeing,



good health and safety of all workers employed, in the latter case with a duty of action required in the form of a risk assessment.

Denney (2009) observes that in the nineteenth century this idea of dangerousness was most pronounced with the idea of dangerous classes. He describes that in traditional society, class and biology were claimed to explain dangerous and criminal behaviour. Lombroso and other nineteenth century positivistic writers claimed that there was a link between criminality and physical features. Although theorists like Beck and Giddens would argue that in a post- traditional society, such class-based ideologies no longer exist, Denney's work (2009) is of note here as research would suggest that it is still those children living in poverty who are most vulnerable to risk. In some cases it could be argued that risk assessments remain biased and are still based on class, gender, race, sexuality and criminal convictions. By working to policies which insist child protection workers use risk assessments, organisations are assuming that a certain client base is risky. Is this notion a class-based or risk-based assessment? This will be explored in the findings and discussions chapters.

With regard to policy development, Littlechild (2008) notes that many policy changes stem from individual child abuse death inquiries. He argues that actuarial risk assessments are the main influences driving policy change and creation. He writes that policies in relation to child protection had been significantly affected by inquiries about actions or omissions relating to one single case (Denney, 2009). To change policy based on a single case can mean that policies and procedures are disproportionate in practice, with the risk of excluding more general risks to the population served. Current policy setting by government is seen by academics as an attempt to control areas for which they are visibly responsible. Risk assessment tools have increased anxiety and fear amongst workers, and the policies and assessments in place have not reduced the risks to children they aim to protect.

As Littlechild highlighted, actuarial assessments are commonly used in the insurance industry, this too is noted by Kemshall, who goes on to describe that actuarial assessments are statistical calculations of risk. These are usually expressed in numerical terms and are based on aggregates of similar patterns of behaviour in similar circumstances. Within the car insurance industry, this method is used to understand which groups of drivers are more likely to have accidents; this type of assessment has more recently been applied to offenders in attempt to calculate the likelihood of

reoffending. Kemshall critiques the reliability of this method and the unrealistic expectations it sets. Kemshall believes that this method is inherently limited in its use and will mean that at least one in ten predictions will be incorrect. This method is useful for the assessment and prediction of frequently occurring behaviours or events such as accidents, but the more infrequent the behaviours or events the less accurate this tool becomes. Kemshall notes that the best way forward is to use a combination of clinical and actuarial assessments; this is indeed now part of social work practice and in some cases is called 'second generation' risk assessment (Davies, 2008). Kemshall notes that risk assessments are in place to aid social workers to make defensible decisions and are there to protect staff when risks occur.

### Organisational Culture

Denney writes that the word 'risk' was coined in the seventeenth century, and referred to 'sailing in uncharted waters' (Denney, 2009). Interestingly, this study found that many social workers described that very feeling when entering client homes, challenging difficult families or undertaking a new assessment. Denney notes that the difference between the terms danger and risk is almost indistinguishable, and that some writers believe the term 'risk' could be dropped from public and political discourse, and replaced with 'danger' as the two are used together so often. Both terms carry a negative connotation and when used in the public arena can lead to fear and panic. It would appear from this notion that semantics and risk narratives are in some cases more menacing than the actual probability of risk itself. This is an area for consideration when looking at policy and discourses in child protection work. The very title suggests that there is something negative or harmful which staff must 'protect' against.

Social service departments are said to be 'actively' engaged in assessing risk *a priori*. However, it has been reported by some researchers (Norris, 1990; Weinger, 2001 and Littlechild, 2008) and the popular media that social service departments take a 'knee-jerk reaction' approach to policy implementation. Were they to focus on the future and use 'experts' to calculate and characterise risk, there is the potential to reduce if not prevent violence and abuse in the workplace. Beck's reflection that the 'past loses the power to determine the future' could be considered short-sighted in terms of the child protection worker who has experienced abuse in their role, as their experience can be learnt from. With the safety and wellbeing of the child already paramount within child

protection departments, a balance between previous experience and future calculations needs to be found in order to protect the worker and improve service delivery.

Denney (2005) also notes that Beck could be criticised for exaggerating risk and suggests that risks are now overestimated. The risk society cannot fully exist if the risks are exaggerated compared to the evidence that they do not exist in reality. Child protection agencies could be viewed as a result of this exaggeration of risk. Are risks now over- exaggerated or have they always existed but are now more readily noted and dealt with? Child protection agencies go some way toward demonstrating that children have always been at risk of abuse and indeed abused; however, it is a shift in societal understanding and moral codes which has led to teams of individuals being tasked to protect children and their rights. To some extent, Denney's (2005) criticism of Beck here is correct and society has become risk-focused to an excessive degree, but in other ways the risk society has raised important questions and led to a more proactive assessment of risk, and in turn prediction and prevention, particularly in the case of child protection work.

Writing from a similar perspective as Denney, Kemshall states that one way of assessing risk in social work is to split risks into two categories, those risks to which people are exposed (people who are vulnerable to risk) and those which people pose to others. The focus of her work was on probation and offenders, therefore, assessing risk here refers to probation officers assessing the likely dangerousness of a prisoner to others both in prison and upon release. The key elements here are that the person assessed is seen as posing a risk to others, risk is defined as harmful and an assessment aims to assess the likelihood of reoffending or danger to others and reduce harmful behaviours or avoid risk altogether. When discussing social work, Kemshall links the assessment of risk to assessing those vulnerable to risk rather than the person who poses risk. In this assessment, the worker would be striving to find and assess the risks to which the client is likely to be exposed, and in turn determine which risks are acceptable or, in the case of child protection, unacceptable.

Littlechild notes that social workers are working to a socially constructed understanding of child abuse. Therefore it makes dealing with the problem in some ways more difficult – unlike the medical model this makes the problem of child abuse and dealing with it less prescriptive. Rather than diagnosis and treatment, child abuse calls for us to

understand firstly what it is and then how to deal with it; no one case is the same and this individualistic and social construct means each response is different. Littlechild believes that with the above there could have been more understanding from politicians and the media with regard to social work interventions and expectations on these agencies, however, this was not the case and so a standardised approach to an intangible problem continues. Littlechild further argues that government policies can be seen as a knee-jerk reaction to media outcry – he gives examples of these in both the youth criminal justice system and child protection practices, evidenced by with the amount of risk assessment forms produced by government. He believes these systems are in place due to fear and a desire to control (Denney, 2009).

Littlechild argues that risk assessments and management have developed as a major area for consideration in the UK with regard to politics and policy. He states that due to the fact that risk assessments are based within actuarial science, the validity, reliability and the use of such assessments in social work should be questioned. Littlechild argues that frontline practitioners experience fear due to the implementation of risk strategies by social work organisations (Littlechild, 2008), and that this fear is caused firstly by the unrealistic expectation to predict risk placed on workers, but also in the failure of these assessments to protect vulnerable children. Essentially, Littlechild argues that central government have decided that completing mandatory forms and assessments will reduce risk posed to vulnerable children and families but will also protect the government and related agencies from public criticism.

The unpredictability of danger and the insistence that risk can be prevented has created a new industry for risk assessors and analysts, i.e. insurance companies, but more relevant to this study, social services, which has changed from a needs-led service to a risk-assessing enforcement agency. The position of the risk community (Beck 1992 and Giddens 1993) is that risk is knowable and therefore predictable and avoidable; this discourse of risk is now a multidimensional continuum, which ranges from those risks which are acceptable to those that are not (Denney, 2009). Within society, Denney argues, there are socially acceptable risks even though the dangers posed by these are negative, for example, smoking and drinking. The public are reliant on expert knowledge of what is dangerous, yet here we see a mixed message, in that although smoking and drinking are highly dangerous, the Government does not have policies restricting these activities. This links back to Giddens' and Beck's views on

uncertainty and distrust in society. Denney concludes that risk has taken on different meanings in different settings and therefore there is both a moral and political element to this debate.

### Risk Assessments

According to Beck (1992), the categories of risk faced by the post-modern society are; nuclear, chemical, genetic and ecological. Risks can range from terrorism to environmental hazards and pertain to everyday lifestyle choices such as food, careers, relationships, mobile phone usage and so on. Society is now bombarded with information about risk. Risk discourse opens the debate on how risk should be managed at both institutional and personal levels. Management is required, as according to Beck, current institutional provision is inadequate. This is especially the case within social care, where violence is underreported (Lupton and Gillespie, 1994; Norris, 1990; Bowie, 1996; Weinger, 2001 and Littlechild, 2003). It will be argued later in the thesis that the findings from this study support Beck's argument. It was stated in the literature review (Chapter One) that social workers feel isolated when they encounter violence and abuse, resulting in a lack of a clear picture about the form and frequency of violence because workers do not feel adequately supported to report incidents. That said, there are methods in place to manage risk to workers. The 'precautionary principle' is applied within social service agencies to manage, control and prevent these 'post-modern' everyday risks. This principle is reflected in the individual risk assessments utilised within social care organisations. Assessment of the form and frequency of violence and abuse within social service agencies is essential to evidence-based policy-making. Beck's ideas can be seen in the use of the precautionary principle, which dictates that potential hazards are identified before they occur and that appropriate precautions are taken to ensure the minimisation of harm. Essentially, this principle allows policy makers to make discretionary decisions in situations where there is an indication of potential harm, but an absence of complete evidential proof. This implies a responsibility to intervene and protect members of the public where investigation discovers a plausible risk after assessment. This principle is reflected within child protection teams, and has formed the basis for the creation of individualised risk assessments.

According to Littlechild, scientific rationalism is the dominant paradigm for predicting risks in the social world. Risk assessments are based on the idea that we can know the

world and determine cause and effect from observation (Denney, 2009 and Littlechild, 2008). These feeds into a culture of blame and accountability – the very nature of risk assessments infers that accidents, incidents and tragedies can be predicted and therefore avoided, therefore where these are not avoided then there is someone who should be held accountable for not doing their job properly. Actuarial risk assessments as noted by Littlechild (2008), are based on knowledge from previous events: insurance companies use this method, gathering knowledge from statistics and research to balance risk by assessing likelihood. They do not use their assessments to predict which individual and at what time and place and accident may occur. As noted by Littlechild, it appears social services are increasingly using actuarial assessments as a tool for prediction and prevention. Littlechild believes this to be a mistake, because this method does not take into account all of the intimacies which intertwine within child protection practices. He argues that there is little acknowledgement that risk assessments are limited in their ability to be prescriptive in a social work setting.

Risk assessments according to Kemshall (2009) are a balance of calculation between the probability of risk and the likely impact of the behaviour or event should it happen. Therefore assessors, in this case child protection workers, are asked to identify the consequences of risks occurring. Kemshall defines two different types of risk assessment used by public services: the clinical assessment and the actuarial assessment. The clinical assessment is derived from a medical setting and essentially is an assessment method based on a case by case basis. It is individualistic and as such takes into account social and personal factors which are relevant to risk. This process is dependent on assessor and client interactions and observation techniques which collect information based on personality, social and environmental factors. These assessments are based on likelihood and are not probability calculations (Davies, 2008). Kemshall highlights that this method of risk assessment has a poor record of accuracy, displaying two main types of inaccuracy, false positive and negative readings. Positive readings would mean that from interviewer/assessor biases can result in the person being assessed too favourably, resulting in a risky event despite no risk being predicted. In contrast, a negative reading is where the assessor deems someone to be high risk and they are further detained despite actually posing a low level risk. Therefore, Kemshall concludes that whilst clinical assessments are helpful in better understating narratives of risky situations, relevant historic information and

provide highly detailed information, the method is not best suited to accurately predicting the probability of risk.

### Critical Evaluation

There are a number of key problems with Beck's argument. Firstly, Beck can be seen as reducing everything in society to risk. There are other previously mentioned factors such as poverty, class, gender and culture, which affect and to some extent determine individual biography. To reduce everything to risk is also problematic for many academics, because risk is a concept that is hard to define (Mythen, 2004). It has been argued above, that risk in child protection work is decided by the individual risk assessment, not by a predefined code or institutional regulation. This conflicts with Beck's theory as it suggests that without defining risk we cannot reduce all societal ties to risk.

Beck does not consider that class or poverty are significant. According to Denney (2009), Kemshall (2009) and Littlechild (2008) too much relevance is given to risk and policy is changed to readily when based on one serious case review. The NSPCC note that in child protection work there are a disproportionate number of children requiring services due to neglect and living in poverty (NSPCC, 2008). This would support the arguments of Littlechild, Denney and Kemshall, as it could be said that an individual's class heightens their exposure to risk, and is therefore also a determinant which should be considered when analysing social work and child protection.

### **Third Order Theories - Risk and Practice**

There are three key theories which support a better understanding of violence, abuse, perpetrator and victim. There are limitations to using these theories without a first order theory (in this case the risk society). These theories support the understanding of the individual worker and client, and therefore are provide a better understanding of practice realities. The following section will consider three of the main psychosocial theories on violence and abuse, alongside the work of Munro.

### Individualisation

Individualisation means that the prescribed choices set out by a traditional society are not followed by the post-traditional generations. Each individual's options are as open

as the law and public opinion will allow. Direct payments, service user involvement and choice in service provider can be seen as shifts toward modernity and reflexivity, placing more emphasis on the individual. The issue of how individuals should behave in society becomes a matter for the individual alone.

Traditional social ties are being replaced by individualised, choice-based social, political and economic institutions (Beck, 1992). With this increased freedom comes an increase in risks that individuals are forced to take in areas such as employment and welfare. As a result, increasing portions of our everyday lives are spent negotiating change, dealing with uncertainty and assessing the personal impacts of situations that appear to be out of our control (Beck, 1992). Social workers must be mindful not to bias service users' decisions and to take care when advising using opinion or personal experience. Professional boundaries must be maintained both to protect the social worker but also to support the vulnerable service user. Beck said that although individuals in the risk society are accountable for their own choices and decisions, those with the privilege of knowledge have a responsibility to distribute knowledge without manipulating the facts.

It is recognised that within social service agencies there can be an acute imbalance of power in the worker–client relationship, sometimes resulting in violence. This violence is a reminder that social work, although a caring profession, is one that polices society (Lupton and Gillespie, 1994; Brown, Bute and Ford, 1986; and Norris, 1990). Where this is not balanced or understood by the individual worker, as with the lay public and experts, this can lead to miscommunication between worker and client.

Beck argues that the direction of information regarding risk moves from expert assessor to the individual member of society, which he deemed a cause for concern. Trying to include all competing knowledge bases creates an imbalance of communication and power, for example, scientific and social rationality (Mythen, 2004). Just as service users can be left feeling powerless in their relationship with professionals, so too can these professionals feel helpless in the shadow of institutional experts. Mythen (2004) also notes that there is a new expectation that individuals confront and manage risks as individuals rather than as members of a community. The effect of such changes for the child protection worker leaves them open to the possibility of risk. When conducting home visits, the worker is asked by the institution's procedures to deal firsthand with any risks presented during the visit; institutional



responses only come after a violent or abusive incident. Thus the systems in place to manage risk put emphasis on the affected individual before, during and after appointments with clients.

Beck's sentiments regarding the risk society agree to some extent with Social Learning theory. The theory suggests that aggression and violence are essentially personality traits that are learnt from our environment and the societal structures that control it. Behaviour is influenced by positive reward and consequences, therefore most humans will comply and behave in a way which rewards them.

### Risk – Perpetrator

Biographies are shaped by all institutions in life, for example, the workplace. Individualisation is reflected in the changing roles of gender, and this change has been most prominent in the workplace, which women have chosen to enter in increasing numbers.

The worker - client relationship is precarious with respect to Beck's concept of individualisation and biographies. Each person's biography is shaped individually and is therefore open and dependent upon decisions made by the individual, chosen without regard for societal messages and norms.

"Individualisation of life situations and processes thus means that biographies become self-reflexive; a socially prescribed biography is transformed into a biography that is self produced and continues to be shaped" (Beck, 1992: 135).

Child protection workers can shape the biographies of the families with which they work. Amongst their duties, they provide young people with advice on contraception, abortion, drugs, alcohol and education.

The experts within the risk society characterise risk and, with this, acceptable norms for society. Social workers make judgements on families who are deemed to be behaving in an 'unsuitable' fashion. According to Beck, experts define what is 'right' 'just' 'good', 'bad' and institutions are then employed to communicate the message to the lay public. This thesis aims to assess how the 'middle man' (child protection worker) feels about having such power and knowledge and whether this position of power puts them at greater risk.

Prior knowledge of a violent perpetrator (client) could bias worker perspectives and their approach to a case. The processes discussed within the risk society regarding knowledge and reflexive learning could go some way to improving workers' experiences. If workers had more positive experiences in practice, they may feel more empowered to report violence and abuse. The impact of violence and its management in the field is a very personal experience. The child protection worker often conducts visits and assessments alone, they are held accountable for their individual decisions and actions. Individualisation in the risk society provides a structure where individuals are accountable, yet the institutions have effective networks in place to support social actors. This is an area that can be developed as part of this study.

Psychodynamic theories attempt to explain or interpret behaviour or mental states in terms of innate emotional forces or processes, particularly in terms of relations between the conscious and unconscious mind.

The psychoanalytical approach was created by Sigmund Freud (1890s) and developed by his followers. At the heart of psychological processes, according to Freud (1890s), is the ego, which he envisions as battling with three forces: the id, the super-ego, and the outside world. The id is the unconscious libido which fuels instincts. The ego manages personality, decision making regarding pleasures that will be pursued to satisfy the id. The super-ego then dictates the person's safety requirements, moral values and society's rules and the individual's goals.

Freud and his followers (Jung, 1913; Adler, 1911; and Klein, 1939) argued that humans are instinctively violent and aggressive. The only difference between individuals is when we chose to act on or show this aggressive urge. There are two ways in which theorists believe that individuals express said aggression; displacement, where aggression is redirected toward a substitute person or object, and sublimation, where the instinctual behaviour is rechannelled towards constructive and creative activities.

### Practice

According to Beck, lifestyles are evolving, and the localising tie of family, community, work and religion has slackened in the second half of the twentieth century. As a result of personal mobility and the stretching of social networks, the cohesiveness of the socialisation process is endangered: "Previously secure sites of solidarity recede,

support networks dissolve and individuals are encouraged to turn inwards toward personal decisions and self resources” (Mythen, 2004: 119). Social services are one organisation set in place to deal with societal shifts and support network depletion.

In the 1950s and 1960s families were relatively cohesive, localised and formally based on the model of the nuclear family. Since then, a number of factors have chipped away at this ideal, including “social mobility, the quest for individual fulfilment, the normalisation of divorce, the loosening of class bonds and the spacing out of work. As a result, gender roles, the family and personal relationships have all undergone reformation and reordering” (Mythen, 2004: 125). Social norms of the 1950s and 1960s are increasingly questioned. One example is smacking children. It is unlawful for a parent or carer to smack their child, except where this amounts to ‘reasonable punishment’; this is imposed in section 58 of the Children Act 2004.

In some cases, the reformation of society has left families challenging these new ideologies and ways of life. Child protection workers question families who have lived the same way for several generations and who might not be willing to change. Being challenged by family members can affect the case management as well as impacting on the worker personally. Insofar as Beck informs us that individualisation radically alters the structures of society, it must be remembered that the development of modernity has produced various forms of social differentiation.

As well as challenging lifestyles, social services provide support for service users. Psychologically, anxiety and insecurity have become an integral part in the modern condition. The risk society demands the individual cope with fear and anxiety, and “therefore handling fear and insecurity becomes an essential cultural qualification” (Beck, 1992: 76). The cultivation of this ability becomes an essential mission of institutions. For example, the NHS now offers therapeutic remedies, and schools offer ‘personal development’ lessons supporting young people in handling conflict, stress, anxiety and fear. Social service agencies offer counselling, group work and practical support for clients. Child protection workers are offered supervision as part of their ongoing role as risk assessor, protectors and conveyors of bad news.

It could be argued that although individualistic in presentation, the psychodynamic theory is influenced by societal and structural influences. For example, the ego and super-ego are influenced and to some extent prescribed by external entities. Whilst this

does not necessarily support an analysis of structural impacts of violence and abuse it does support the argument that structural influences define, according to Freud, personality, decision making, pleasure, safety requirements, society values and morals. This in essence concurs with the findings of Beck, that it is indeed the institution that characterises risk perception. With regards to psychodynamic theory, it could be argued that child protection worker's personality, reactions, resilience and coping strategies are all shaped from birth by society and further informed by the structures within which we live.

However, Psychodynamic theory does not provide an understanding of the effects, management or formulation of policy, and is limited to helping us understand individuals within society. Also, Freud's many critics (1920s Rank, Ferenczi, and Reich; 1930s, Horney, Fromm, and Sullivan) should be borne in mind when using psychodynamic theory. Training and social work qualifications focus efforts on not only understanding the individual (by drawing on theorists like Freud) but on developing approaches which reflect the teachings of other behaviourists. For example, solution-focussed therapy, motivational interviewing and cognitive behavioural therapy. The key points of these critiques are the universality of Freud's theory, his focus on sexuality, and feminist writing argues that in principal his theory is anti-feminist (Horney, 1950; Friedan, 1957) . The behaviourist theories will now be explored.

Sublimation may to some extent aid when examining policy-making and considering the individual. If Innate Aggressionist theory were taken as the core theory for this thesis then the fact that individuals all have the capacity to express aggression and violence would provide a start point for policy. The notion of sublimation could then be used to support the positive channelling of aggression, frustration and violence. With this in mind child protection policies could allow for the 'fact' that individuals are innately aggressive and therefore factor this in when looking at procedures.

However, in terms of better understanding how to manage violence and abuse, Innate Aggressionist theory is limited as it suggests that violence is unpredictable. It also does not add to knowledge with regard to structural understandings of violence and abuse. It suggests that violence is an innate part of human individuals and therefore not socially constructed, arguing that events, timings, environment and so forth do not influence an individual's likelihood to become violent and aggressive (Montagu, 1976). This theory

cannot be used to further enhance the analysis of violence and abuse within child protection structures for these reasons.

Social learning theory is the idea that people learn within a social context. This learning is facilitated through modelling and observation. Individuals, but moreover children, learn from their environment, seeking acceptance from society by observing and imitating influential models, in most cases parents. The social behaviour is influenced by being rewarded and/or punished for these actions, in the first instance by your parents, but later by the wider community and society in general.

Social Learning theory provides a more positive theory when analysed with reference to violence and abuse in social work as it indicates that individuals can learn new behaviours, adapt and change responses. Social Learning theory can support the recommendations of the study as it aids in a better understanding of individuals and how best to structure organisations. With this theory in mind perhaps working with rewards and sanctions and applying these to 'child protection' and 'child in need' plans could provide a beneficial working model for client and worker alike. Social Learning theory is inherently an individualistic theory which considers the role of society and its influences on the individual psyche, behaviour and character formulation. This theory, alongside Beck, will be considered further when analysing data and making recommendations for policy later in this study.

The key teachings from Munro's report to central Government in (2011) provide several concerns which reflect the key themes highlighted in this chapter, moreover, in this study. Munro (2011) writes that the over-bureaucratisation of social work has had unintended consequences for face-to-face practice, meaning that social workers are spending less time with children and families and more time at the office. Munro therefore encourages a review of regulations and policies which dictate face-to-face practice, of the stringent deadlines placed on staff and the procedures which they have to follow in the field. Munro believes that such a review would allow child protection workers to earlier and more effectively detect signs of abuse in families, or work in a multi-agency fashion to better understand the risk to vulnerable children. Munro agrees that there is uncertainty in social work and suggests that this stems from systems which place pressure on social workers to be omniscient without appropriate training or expertise. This ultimately leaves staff, according to Munro, in a system fuelled by anxiety.

## Critical Evaluation

Previous literature has documented several different theories to support their research into violence and social work. In the majority of studies, third order theories are used, which focus on the perpetrator and the aspects of their character which predisposes these individuals to react and behave violently. Interdisciplinary efforts made to understand the nature of violence relevant to this study, from psychosocial literature is based on the individual. These psychosocial studies have value in understanding individual dynamics when users of children social care are violent towards staff, and therefore require acknowledgment in this thesis.

### **Risk Theory: Understanding the Impact of Violence and Abuse**

The table below highlights the three tiers of understanding (structural, policy and individual), and indicates where each theory helps further an understanding of risk, violence and abuse in these contexts.

	<b>Structural (1<sup>st</sup> Order)</b>	<b>Policy (2<sup>nd</sup> Order)</b>	<b>Individual (3<sup>rd</sup> Order)</b>
<b>Ulrich Beck - Risk Society</b>	✓	✓	✓
<b>Anthony Giddens</b>	✓		✓
<b>Mary Douglas</b>	✓		
<b>Brain Littlechild</b>		✓	
<b>Hazel Kemshall</b>		✓	
<b>David Denney</b>	✓	✓	
<b>Sigmund Freud - Psychosocial Theory</b>	✓		✓

<b>Innate Aggressionist Theory</b>			✓
<b>Albert Bandura - Social Learning Theory</b>	✓		✓
<b>Eileen Munro</b>		✓	✓

This table demonstrates that Ulrich Beck's theory is best placed to support an overarching understanding of risk, violence and abuse in social work. It also highlights other relevant theories which can go some way to strengthen the findings and notions contained within this study.

At the outset of this chapter the aim was to better understand theories of risk, violence and abuse. To summarise there are ten different theories which have been considered, as highlighted in the above table, each contributes to the knowledge and understanding of risk as applied to social work. The analysis presented in this chapter has assisted in determining which of the ten theories best suited the aims of this thesis and could therefore provide a theoretical framework for this study.

Of the ten theories, there are several which add knowledge to the findings and discussions included in this thesis (Littlechild, 2008; Giddens, 1971; Kemshall, 2009; Munro, 2003; and Denney, 2009); however, most of the other theories have more limited use (Freud, 1890s; Bandura, 1971; and Douglas, 1992). As demonstrated in the table above, if particular theories were used in isolation it would lead to a very specific and limited theoretical understanding of risk in child protection work. If for example, the aim of the study was to understand culture and identity and how this affects and influences violence and abuse then perhaps the work of Douglas (1992) would have been given more prominence. However, the central research question asks 'what is the impact of violence and abuse in child protection' and therefore it is essential to provide an understanding at each level of child protection practice.

The impact of violence in child protection work is a vast topic, which, as acknowledged in the conclusion (p 227) could be examined from several different viewpoints. To ensure that the scope of this PhD project was focussed it was

decided that the focus of the thesis would be directed towards the impact of violence. After undertaking a literature review, to ensure originality, provide a different perspective and add to the knowledge base, an analysis of risk theories was undertaken. It was found (in this study) that there are three levels of impact with regard to violence and abuse; the organisation, the team and the individual. Thus the focus on Ulrich Beck's Risk Society; whilst Giddens (1971), Littlechild (2008), Denney (2009) and Kemshall (2009) all make points about risk which are noteworthy in relation the findings and conclusions, Beck (1992) provides a theoretical structure which best suits the aims and objectives of this thesis. For this reason, as was suggested at the outset of this chapter, Beck provides a theoretical structure that is most relevant to the aims of this study.

The 'Risk society' thesis provides a framework for developing an appreciation of not only the client base but of the worker and how humans interact within institutionalised power-control relationships. Beck (1992) writes about the interplay between society, institutions, experts and the public. Whilst there is merit in acknowledging a wealth of risk theories, the ideas of Beck in the risk society are best suited to underpin this thesis because he offers concepts relating to first, second and third order intricacies. For example, the risk society provides considerations of society, risk distribution, knowledge and reflexive learning as well as theorising individualisation, biographies and lifestyles. He theorises about a new form of modernity which has changed and shaped lifestyles and individual biographies. His approach enables us to understand the impact of violence and abuse showing how the concept of risk provides a framework which contributes to creating change within social work departments and evidentially supports the proposals made in this thesis for policy and procedure.

The third order theories are too individualistic for the scope of this study and cannot provide understanding in three key areas, structure, policy and individual. Any useful theory needs to place violence and abuse in the context of the wider structures within which these behaviours play out. A combination of risk theories, along with Beck, supports the notion that child protection workers are working within the complexities of both society and humanity. Thus, Beck's theory best supports a useful understanding of society, institutions, teams and individual workers and clients.



## **Conclusion**

The thesis works from the proposition that theory can provide a context which guides not only the development of policy but also individual interactions with service users. In the case of violence perpetrated against social workers it will be argued that these three levels of analysis can be identified and are also related. Thus structural explanations of violence provide universal explanations of violence. Some of these theories use the individual as a starting point, whilst others are less individualised but more societal in nature. The chapter considers how theoretical structural explanations are relevant to the development of policies and discourses, and how policies subsequently filter down into face to face practice with service users.

Beck's theory will be utilised to provide a framework in which the perpetration of violence can be understood and the findings interpreted. In the risk society, 'institutions' like child protection services are responsible for the characterisation and assessment of risk. Beck believes that there is a shift in the relationship between risk and institutions. The contributions from the other reviewed risk theories will not be overlooked and their relevance to this study will be presented in the findings chapters.

The main concepts which Beck develops in the risk society thesis will run throughout this thesis, raising fundamental questions relating to institutionalised practices within social services child protection procedures. The following chapter will present the methodological approach of this study.

## Chapter Three: Methodology

*“Even though 100% safety cannot be ensured, social services can do their utmost to reduce the risk of violence” (Weinger, 2001: vii).*

### Introduction

This chapter explains the methodological design and the methods used to conduct the study. To gain an accurate understanding of the realities faced by child protection workers, an analysis of social services as an institution, the team and the individual worker was undertaken. This thesis is premised on the idea that violence and abuse have negative connotations in practice. The methodological design provides the structure for a coherent narrative of relationships and processes within participating institutions. Beck (1992) argues that risk is formulated by experts within institutions. The methods employed will gauge how far the inter-play between agency and worker constructs perspectives on risk. Together the methodology and methods will gather findings that present considerations and recommendations for other child protection agencies.

The chapter introduces the methodological approach, explaining its design and providing a justification for the use of a mixed methods approach. Sampling and access are discussed with respect to the steps taken to secure two participating councils and the potential difficulties with achieving this. The rationale for data collection methods is presented, which reflects the research design. The methods employed are relevant to collecting valid and reliable data whilst complementing the study's design. The combination of qualitative and quantitative methods is considered in the data analysis section. Finally, the ethical considerations posed by the research, methods and sample group are summarised.

### Design, Strategy and Framework

The study exploited the strengths of both quantitative and qualitative data collection methods. This 'mixed method' approach was supported by the use of triangulation which is commonly used to strengthen the validity of research (Alasuutari *et al*, 2008).

### Triangulation

Triangulation is the idea that looking at a social phenomena from multiple points of view improves accuracy. Webb *et al* (1966) encouraged researchers to 'triangulate when possible'. The process complemented the use of both quantitative and qualitative methods. Methodological triangulation involves the verification of data collected via one method with data collected using another. In this instance, the quantitative questionnaire responses confirmed the qualitative interview statements. The methods employed meant that the findings could be replicated elsewhere, at another time and with another team of child protection workers. The findings were corroborated by comparing the data produced in the document analysis, to the results from the questionnaire and interview responses. Whilst the use of triangulation improved accuracy and validity, it also complemented the aim to present a broad overview of the child protection setting.

Triangulation is a research design which systematically relates multiple methods. By utilising triangulation and a basic mixed method approach the aims of the study were addressed and measured in a thorough way. This approach provided a broad range of results which provided a more comprehensive and analytical understanding of the topic. When writing the data analysis chapters, the findings were integrated with the concepts of Beck's risk society and the different data sets were compared and contrasted to provide recommendations for practice in the discussions chapter.

### Mixed Methods

Mixed methods were chosen for the following reasons; a mixture of methods can support results being more replicable, it provides statistical evidence which is supported by an experiential account and to support triangulation. Most importantly for this study mixed methods provide a current snapshot of the extent of the problem in practice (quantitative) and the impact personally and professionally of violence and abuse (qualitative).

Mixed methods are required to support a design incorporating triangulation. Triangulation tests one set of results against another by using different methods. To ensure that as far as possible the results were valid, reliable and replicable, mixed methods were employed. Ultimately the study aims to gain a better understanding of

violence and abuse towards child protection workers. A clear view of the aims of the study ascertained how the data should be collected. Different questions required different methods to answer them. Not all the points for discussion were amenable solely to a quantitative investigation, to meet the objectives of the study a qualitative element had to be engaged. The study aimed to assess the 'impact' of violence and abuse directed toward the child protection worker; an opportunity to present worker perspectives meant that questions gauging experience had to be asked. For example, how did your personal experience of violence and/or abuse affect you? Qualitative methods prominently feature three data collection techniques: observation, interview and the review and analysis of site-generated or related documents. Two of these methods were used in this study; the analysis of relevant policy documents and semi-structured interviews. The use of both qualitative and quantitative methods ensured that the thesis demonstrated not only experience and feeling but that the results were grounded with statistical evidence, representing the extent of the problem within child protection teams.

The key differences when using mixed methods are the collection and analysis of data. When using these different methods it is easy to forget that quantitative and qualitative methods share important similarities, which can be seen in both the logic and purpose behind the two approaches. Quantitative data can identify individuals, groups and settings for qualitative field work and indicate representative and unrepresentative cases. Quantitative research, however, may be mostly used for testing theory, but it can also be used for "exploring an area and generating hypothesis and theory" (Punch, 2005: 235). Bryman (2008) states that by combining the two methods the researcher can capitalise on the strengths whilst compensating for the weaknesses of each approach. The strengths here ensured the validity of the data whilst presenting a broad perspective of experience. For example, if the study relied solely on the data gathered from quantitative methods, only the form and frequency of violence could be gauged. By using this method in conjunction with qualitative interviews, an overall picture of child protection, violence and abuse could be illustrated. By exploiting the strengths of both quantitative and qualitative data this study achieves its objectives whilst presenting an original analysis which contributes to academic understanding.

When using mixed methods there is a question as to how to 'combine' quantitative and qualitative methods. Brewer and Hunter (1989) see synthesis at all stages of the

research, from formulating questions to drawing conclusions. The combination of methods enhanced every stage of data collection. Firstly, the quantitative element helped with the choice of subjects for qualitative investigation. The questionnaires selected the respondents for the qualitative semi-structured interviews. For example, those participants who responded that they had experienced violence in the questionnaire were asked to take part in the interview. The questionnaire was also used to complement and add to the qualitative parts of the study. For example, the numerical data reflects the extent to which violence is happening, whilst the qualitative data provides a personal account of its effect. The quantitative data alongside the review of relevant council documents will highlight the degree of underreporting (if any) of violence and abuse at work. Correlating the results of the questionnaires into a quantitative data analysis chapter provided an overview of the team. The statistics reflect a consensus of information from each participating county council. After analysing the data from the questionnaires, the subject matter for the semi-structured interviews was updated to keep the content relevant. Thus the use of mixed methods integrated the views of the institute, team and worker.

### **Access and Sample**

It would be impossible within the restrictions of this thesis to approach all child protection workers in the UK and so a small representative sample was chosen. This research looks to expose patterns and distinguish characteristics of child protection workers. To present findings that to some extent could be reflected across the population of child protection workers, two local authorities in England were approached. In total there were one hundred and thirty child protection workers across the two councils. This section goes on to explain the selection of the sample group, access and initial contact with councils.

#### Sample

The use of an appropriate sample was deemed to be the most suitable approach for this study. The size of the sample required depends on the nature of the population, the purposes of the study and the resources available. The study aims to make recommendations for child protection workers based in England. Currently there are twenty-two thousand and fifty social workers registered as working in children's social care in either voluntary, private or independent sectors (Community Care, 2012). With

no access to funding for travel the sample group had to be within reasonable travelling distance, and as such all the councils approached were based in the South of England. The purpose of the study can be met by using a small sample and as such the resources available do not directly impact on the findings or the outcome of the study. This is supported by the sampling process, which simplified means that not everyone in a population must be studied before generalisations can be made about the population (Chadwick *et al*, 1984). The restrictions of an independent study were not the only influencing factor when deciding the sampling group. The methodological approach meant that a small sample was drawn to enhance the in-depth and personal nature of data gathered. The study did not aim to make sweeping generalisations but rather looked to inform policy with specific examples which can be learnt from.

This study utilised the model commonly known as the 'sampling model' (Chadwick *et al*, 1984). The approach starts by identifying the population the sample will generalise to, in this instance, child protection workers. A fair sample is then drawn from the chosen population and research is conducted with the sample. The sample is representative of the population, therefore the results gathered can automatically be generalised back to the population (Chadwick *et al*, 1984). What is deemed a 'fair' sample? This was an area of contention within the study. 'A fair sample' is not defined; it is up to the researcher to define what is fair in relation to their study. This proved difficult to assess in practice. The sample for this study was drawn and influenced by the fact that this was an independent PhD and not an institutional study where money and time did not pose a problem. For example, the PhD was independently funded and so there was no resource to provide an incentive for participants or to fund travel around the UK. The small sample was also influenced by the choice of methodological approach. With the above in mind it was decided that two out of the one hundred and fifty-two principle authorities were approached to take part.

### Access

According to Lee (1995) access to a research setting is never a given. "What is open at one juncture can be closed at another time or in different circumstances" (Lee, 1995: 16). With this in mind, the councils asked to take part were chosen for reasons of convenience. Contact was made with previous employers to maximise response time for participants and to reduce time spent trying to gain access to unknown counties or boroughs. As the study held no financial or material incentives it was hoped that the

researcher's relationship with managers would mean easier access as well as a high response rate. It was acknowledged that the relationship with staff could mean that there was bias or a reluctance to share intimate details with an interviewer who was known to staff. This was reflected and it was felt that as there were no direct or close personal relationships with staff that research could go ahead with these councils. 'Directors of Service' were first approached by telephone to assess whether they were interested in taking part in the study. When interest was shown, the directors asked for a more formal proposal to be sent to them via e-mail. After gaining e-mail contact, 'Directors of Service' requested attendance at senior management group meetings to present the study to a wider audience. Granting access carried with it certain risks from the manager's point of view, the research could expose unflattering or sensitive aspects of the working environment or disrupt routine (Lee, 1995). In this case, once the research was explained and questions answered there was little difficulty in accessing the sample group and in fact the managers were enthusiastic about participating.

The manner in which participants are approached is crucial to ensuring access and a high response rate. The material provided must be easy to comprehend and accessible. For example, when drafting the questionnaire information and the initial contact letters, images of Post-it notes were used to convey important messages relating to the research. In a recent piece of market research a Post-it note drew seventy-seven per cent more respondents than the original letter without a Post-it (Lewis, 2009). The letters sent to management and workers were colloquial and comprehensible, therefore taking the reader less time to 'digest' the content and more time to understand instructions.

#### Demographics of Participating Councils

The sample group consists of two different councils in England. The two councils approached were very different in terms of size, form of organisation, location, policy and budget. Thus the discussions chapter presents a broad and unique example of the child protection setting. The social demographics of the councils offer a broad cross-section of ethnic communities, affluence, access to services (e.g. education), unemployment, substance misuse, homelessness, levels of crime and geographical location. These factors could have affected the experiences of the social worker and therefore the results of the study. For the purposes of this study the councils will remain

anonymous and are referred to as Council A and B. Due to the relatively small sample size, it was decided that the response rates and demographics of respondents would not be separated statistically so as to ensure the anonymity of the respondents.

## **Research Methods**

Care, control and thoroughness in the procedures for data collection are stressed particularly where mixed methods are used (Bryman, 2008). The policies held by each council were analysed, providing an account of the procedures in place to assess, prevent and manage violence and abuse. Questionnaires were sent to child protection teams to collect data from a number of workers in different areas: these provided quantitative feedback. After collating the data gathered, semi-structured interviews were carried out with those respondents who had experienced violence or abuse at work and were willing to take part in an interview. The following narrative explains the methods employed. The initial pilot will be presented, followed by an analysis and justification of the chosen methods.

### Pilot

The 'pilot run' as Pahl (1999) found in her study of violence against social workers, is essential for two reasons. It highlights questions that need altering and topics that need to be added. Pahl utilised the questionnaire method and after carrying out a pilot, decided to redefine the questions posed. The pilot was an effective way of measuring that the questionnaire was worded correctly and inclusive of all topics.

The approach to the pilot was simple. In an attempt to avoid bias amongst the respondents, the sample group was small, it did not specifically include workers whose main role was child protection and the pilot group did not form part of the final study. The pilot was conducted with a Drug and Alcohol Action Team. The processes of questionnaire and semi-structured interview were tested with the same approach as that of the final roll-out.

Pilot studies are particularly crucial in relation to "research based on the self completion questionnaire, since there is not an interviewer present to clear up any confusion" (Bryman, 2008: 233). Questions that appeared to be misunderstood were changed and made clearer. The pilot study offered the researcher the opportunity to determine the clarity of instructions and the adequacy of them in practice. As mentioned above, the



questionnaire was piloted as there would be no interviewer present on the day. The opening instructions were simplified, and a chronological frame of reference was added to the questionnaire: for example, respondents were asked 'in the last two years or in your current role'. This ensures that the data reflects fairly on the institutions involved, as participants will specifically be reporting about their experiences of practising in that council. It also means that the recommendations for policy and practice are appropriate as the timescale ensures that answers relate to current legislation. Taking this into consideration, the interview structure was also piloted. It is important to trial the interview structure in order to test the interviewer's approach and techniques. Comments regarding body language and tone were taken on board and were implemented during the official interview process. It was noted that the speed at which the interviewer spoke could be altered, so the natural habit of the researcher to speak quickly was monitored during the interview process. The interviewer spoke at a pace to suit the participant, giving them the opportunity to respond in their own time.

#### Council Case Studies

Council case studies involved an examination of those policies and procedures in place to protect workers and deal with incidents where violence or abuse has occurred. An analysis of the risk assessments used in each of the councils was undertaken. As part of this analysis, of the policies adopted by each agency were cross-referenced to highlight the strengths and limitations of each. In the risk society, Beck asserts that the institution defines risk and characterises how risk is perceived by social actors. The analysis of relevant council documents aimed to gauge to what extent Beck is correct in his hypothesis and how his theory relates to child protection agencies. The analysis of council documents will be presented in Chapter Four.

The policies examined included; 'Health and Safety', 'Personal Safety' and the 'Prevention and Management of Violence in the Workplace'. Each council's 'Lone Working Policy' was examined and compared. The council's specific policies for the worker and procedures for child protection professionals including; 'Safeguarding in Employment', 'Guidance for Safer Working Practice Child Protection Conference' and 'Safety Procedures' were all studied. The analysis included a thorough review of the risk assessment framework employed by each council.

The procedures in place to deal with the risk of violence and abuse within the councils were then compared. For example, are interview rooms fitted with push button alarms or a hand-held portable device which activates the alarm? Do workers have a personal alarm? What notices are present within the council buildings reminding visitors and clients that abusive, violent or intimidating behaviour towards staff will not be tolerated? The training programmes set in place to educate, prevent and protect workers were compared with the other councils. For example; 'Personal Safety Basic', 'Advanced and Frontline Staff', 'Health and Safety for Managers', 'Health and Safety Awareness' and 'Managing the Personal Safety of Staff'. Whether these training sessions are mandatory, actively attended by staff and relevant were also investigated.

The areas for examination which are detailed above also formed part of the questionnaire and interview topics. Participants were asked if they are aware of policies and procedures in place to protect them, whether they know how to and/or would report incidents and what training they have accessed in the last two years. The chapter now moves on to discuss the methods of questionnaire and interview.

#### Online Questionnaire

Following the analysis of relevant council documents, the questionnaires were distributed to one hundred and thirty child protection workers. Only child protection workers were included as they are the focus of the study. The teams that took part in the study were the Child Protection Team (over and under 11s), the Child in Need Team and the Referral and Assessment Duty Team. Child protection work is carried out by other teams such as the Fostering and Adoption Team. These teams did not form part of the group questioned as their role is multi faceted and not definitively focused on the child in need of protection and their family. As reflected upon earlier, although primary contacts (managers) were known to the researcher, the social workers taking part in the study were not.

Initial contact was made with child protection workers via email. Today as many as one hundred million people worldwide have access to email; eighty per cent of all users use the internet daily (Seale, 2004: 107). In 2010, sixteen million five hundred thousand people in the UK alone access the internet daily at home; that equates to sixty-four percent of the population (national statistics online). The number of people using the internet with ease and frequency suggests email is a viable communication and survey

method. There are several strengths to using the internet as a medium for communication. Firstly, respondents who perceive technology as easy to use are more likely to respond. Using email and internet survey sites eliminates duplicate responses and also eliminates follow-up emails that are sent twice and unlike a paper copy, unless a respondent purposefully deletes the survey it cannot be lost. The flexible approach taken with the questionnaire enhanced these 'ease of use' perceptions.

A potential problem that occurred when trying to send the initial consent letter and link to the questionnaire was a lack of direct access to an email directory. To overcome this problem the email message and survey links were sent to the team administrator who disseminated the email to all child protection workers in the team. There is no clear evidence that new technology produces a higher response than postal mail. In a review of nine studies that have used both postal mail and email four studies show postal mail achieving higher response, three indicate email as higher and two with no difference (Seale, 2004: 108). Emails were sent to the participants' work email accounts which created the potential for biased responses. Completing the questionnaire in the workplace could have caused anxiety for the worker, dishonest answers or a low response rate. To overcome this, it was explicitly stated to the respondents that the survey link and email message could be forwarded to a personal email account and the questionnaire completed away from the office.

When it has been used previously, data collection via a questionnaire has proven to be an effective means of research. When gathering data on violence in the workplace, Brown, Bute and Ford (1986), Norris (1990) and Broadhurst, Hawkins and Briggs (2004) all report high response rates after distributing small-scale questionnaires. Subsequently, questionnaires sent to a small sample of child protection workers were selected as an integral part of the methodology.

To ensure the highest possible response rate with thorough and thoughtful responses, the methods chosen had to take into account the limited time of child protection workers, thus the decision to put the questionnaire online. Kehoe and Pitkow (1995) report that web-page-based polls have been noted for their ability to generate a high number of responses. There were numerous strengths to this approach: it was convenient for participants, faster to complete than a postal survey whilst avoiding the cost of print and mailing, it reached a large number of workers instantly, allowed the researcher to regularly monitor the response rate and the raw data could be swiftly

loaded onto computer software for analysis. The main criticism of the online questionnaire method is the impersonal nature of the interaction between respondent and researcher. In an attempt to mitigate this, team meetings were attended to discuss the aims of the research and build a rapport with participants. Bryman (2008) notes that when approaching participants via email, the initial message could be wrongly identified as nuisance email. Therefore, managers were asked to remind staff shortly before the invitations were distributed. The strengths of using the internet for questionnaire research in this case outweighed the limitations.

When structuring the questionnaires, closed questions were used (see appendix 1). This produced a time-efficient questionnaire for the respondent and a questionnaire that generated results which could be easily coded for the researcher, ultimately gathering a widespread range of statistics. The questionnaire had to be especially easy to follow and its questions had to be particularly easy to answer, because there is no interviewer in the administration of the self completion questionnaire (Bryman, 2008). For this reason the questionnaire utilised fewer open-ended questions, as closed ones were easier to answer. The design was repetitive, yet asked the participant to answer 'yes' or 'no' rather than use scales so as to avoid 'average' answers and participant fatigue. Questionnaires are viewed as a positive method of data collection; one reason for this is the absence of interviewer variability and effects (Seale, 2004). It is also seen as more convenient for respondents rather than being observed or attending a meeting, they can complete a questionnaire at their leisure. From a researcher's stance, the questionnaire can lack the personal opportunity to prompt, probe, develop or ask the participant to expand answers. Sometimes questionnaires provide lower response rates than face-to-face meetings or surveys. However, relevant literature has demonstrated that questionnaires can gather a response rate of greater than fifty per cent.

Whilst the questionnaire was designed based on ease for respondent and gathering as much statistical data which was simple to code and quantify, the questionnaire design and content was also influenced by the literature review. The questionnaire was inclusive of all forms of violence and abuse as in previous research the studies were in some cases exclusive and did not include forms of abuse which were not physical (Brown, Bute and Ford 1986 and Pahl 1999). The literature review also highlighted a lack of definition of violence and therefore this study included questions on institutional

policy and procedures as well as questions referring to government initiatives. Finally, the majority of literature reviewed noted that violence and abuse is underreported, therefore the questionnaire included questions relating to reporting but furthermore queried who the respondent would report to.

Each respondent was asked exactly the same questions, which ensures a high degree of reliability because the results are replicable (Miller and Brewer, 2003). The questionnaire was split into four sections. Section one asked for basic demographic information about the professional. For example, gender, job title, experience and time spent in current post (see appendix 1). Section two was split into two halves to assess stress, fatigue and resilience. The first section dealt with incidents of verbal abuse throughout the respondent's career in social services. Consideration was given to verbal abuse because the definitions of violence and abuse advocated by this study are inclusive of such behaviours.

The section moves on to discuss physical abuse and asked the respondent, 'in the last two years or in your current role have you been...'. So that the institutional case studies reflect fairly on participating councils, the questions regarding physical violence specifically relate to the work undertaken within their current roles. Issues such as sexual abuse, harassment, use of a weapon, stalking and being held hostage are covered under the 'umbrella' of physical violence. Also of note is the issue of written threats, inclusive of text messages, email and social networking sites. Reflecting this in the study makes the questionnaire contemporary and relevant.

The final section asked about the affects of violence and the management of violence and abuse by the institution. The questions asked here are potentially the most sensitive and an area where respondents might be reluctant to answer openly. There is an element of 'whistle blowing' to this particular line of enquiry. The anonymity of the questionnaire counterbalances the reluctance to share experiences. Anonymity and the confidentiality of results was reiterated in any narrative shared with respondents.

The final part of the questionnaire offered the participant the opportunity to add any notes or comments that had not been raised or to expand on their responses. The same themes detailed here run through the structure of the interview. As previously mentioned, the data gathered from the questionnaire informed the interview process.

### Semi-Structured Interviews

After gathering the quantitative data, the interview needed to reflect a more personal and in-depth perspective of the workers' experiences. For this reason purposive sampling was used. Those respondents who experienced violence or abuse whilst in the line of duty were invited to meet with the researcher to complete a semi-structured interview (thirty-six per cent of questionnaire respondents opted to take part equalling twenty child protection workers). Workers who did not report any experiences of violence or abuse were given the opportunity to respond within the questionnaire and statistics of those who had not experienced violence or abuse at work were recorded. However, due to the aims and objectives of the research it was not necessary to interview those candidates. These participants contributed solely to the questionnaire and having no experience of violence and abuse meant that they could not answer the semi-structured questions in the interview. Most writers considering interview sampling in qualitative research recommend 'purposive sampling'. Such sampling is essentially strategic and entails an attempt to establish a good correspondence between research questions and sample. In other words the researcher samples on the basis of wanting to interview people who are perceived to be most relevant to the study (Bryman, 2008).

The construction and perception of management is a complex relationship that needed to be considered when composing the semi-structured interviews. Woods (1980) reported, "one of the firms which permitted him entry was organised in a paternalistic way; in the paternally organised firm managers presume to know what their workers are thinking" (cited in Lee, 1995: 21). With regards to the issues raised by Beck (see Chapter Three) about experts in institutions, the approach taken considered the relationship between the expert and the social actor. Beck's processes suggest that there could be a relationship between underreporting and workers' perceptions of management. This issue also needed to be taken into consideration when organising a location for interviews. Private offices were offered by the councils taking part and the interviewees were asked where they wanted to meet. Interviewees were reassured that the results of the study were anonymised which helped 'peace of mind' and increased candid responses.

This research reflects similar objectives to that of Stanley and Goddard (2002). As with their study, interviews were utilised to gather qualitative data into the individual experiences of child protection workers. Patterns, themes and differences were drawn

to find a uniform means of supporting these reported 'feelings' and 'experiences'. Semi-structured interviews allow probative follow-up questions and exploration of topics unanticipated by the interviewer. They facilitate development of subtle understanding of what happens in each case and why. The semi-structured interview provided an opportunity to gather knowledge on the experience, reporting, affect and management of violence for the individual worker. Interviews that are semi-structured allowed the respondents to develop those answers touched upon in the questionnaire, giving a real insight into their personal experiences, whilst ensuring that the interviewer could gather answers specific to the study. The fact that the interviews were partially structured kept both the interviewer and interviewee to task and on topic. Miller and Brewer (2003) argue that because the semi-structured interview collects information from respondents systematically it is an ideal way of producing data that is suitable for quantitative data analysis as well as qualitative.

The semi-structured interview method has several strengths. This format gives the respondent the flexibility to expand on issues that have affected them and therefore allows the interpretive researcher access to the interviewee's views. Bryman (2008) states that the successful interviewer must be – knowledgeable, structured, clear, gentle, sensitive, open, steering, critical and interpreting. Whilst being mindful of the above when conducting the interviews it should be noted that it is difficult to achieve all of these. The difficulties and possible biases experienced in the interviews will form part of the narrative on data analysis later in the thesis. Consideration was given to the power imbalances between interviewer and interviewee. Some critics might suggest that an interviewer should not be steering. The semi-structured interview provides a framework by nature and thus requires a degree of 'steering'. Steering is also required to ensure the interviewees stay on topic so that the interviewer can record as much information as possible in the time available. This called for a self-reflective interviewer; reflections will be demonstrated in the 'memos' kept in data analysis.

To obtain accurate information, the interviewer must be able to get respondents to answer fully and honestly and must not influence answers or opinions. Questions were asked such as: "Violence and abuse is seen as customary to everyday social work, would you agree with this? If so what affect does this have on you personally?" These offered the respondent a vignette of the norm and asked for their experience; 'safety in numbers' can put participants at ease (see appendix 2). The semi-structured interviews

aimed to open discussion about experiences and gauge underreporting (see appendix 2). The content collected during the interview process would then be compared to the information drawn from relevant council documents. This correlation aimed to highlight underreporting. If the council stated that ten cases of violence and abuse had been reported but the statistics showed a different figure, this would highlight a disparity and a suggestion of underreporting. The interview was recorded using a Dictaphone, thus transcription was accurate word for word. There must also be a control of errors arising from the respondent such as the respondent going off topic, becoming emotional or needing to leave the interview due to timings. These were controlled by the interviewer who was aware of the potential for the material to be highly emotive whilst being perceptive to the needs of the participant. Time scales for the interview were always set at the beginning of the session.

The semi-structured interviews provided the qualitative data for the study. The substantive areas covered in the interview were: form and frequency, experience and reporting, affect and management and policy and procedures. Some examples of questions posed during the process were:

<b>Form and Frequency</b>	As a child protection worker do you accept that violence and abuse come as part of the job?
<b>Experience and Reporting</b>	To what extent do policy and procedures (risk assessments, incident reports and supervision) set in place make you feel protected in practice?
<b>Affect and Management</b>	What affect did the violence or abuse you experienced have on your decision-making? Or the final outcome of the case if it was not your decision?
<b>Policy and Practice</b>	In your opinion and with your personal experience in mind, what could be improved with the current system to support child protection workers in the line of duty?



The interview responses are firstly presented in two qualitative findings chapters (Chapters Six and Seven), interview data is then displayed alongside quantitative feedback in Chapter Eight. Data analysis is described below.

### **Data Analysis**

The data was 'linked' together in the form of a discussions chapter (Chapter Eight). As the data was 'linked' the initial analysis of the quantitative and qualitative data was completed separately. The form and frequency was measured and displayed with graphs and tables. The experience and reporting along with the affect and management results were analysed as part of the qualitative feedback.

The data from the questionnaire was entered into an SPSS spreadsheet, the results reflected in the spreadsheet and various charts were then analysed. SPSS offers a simple format to enter data and, provides numerous ways in which the data can be presented; this enabled the researcher to offer a comprehensive set of analysed results. As Punch (2009) agrees, "now in its eleventh release, SPSS is an extremely versatile statistical package for the analysis of quantitative data" (Punch, 2009: 281). In most social research the data analysis involves several steps, approached in this order: data preparation involves logging the data in; checking the data for accuracy; entering the data into the computer; transforming the data; and developing a database structure that integrates the various measures.

A description of the statistics and basic features of the data is then completed. 'Descriptive statistics' provide simple summaries about the sample and the measures. Together with simple graphics analysis, they form the basis of virtually every quantitative analysis of data. Finally, 'inferential statistics' investigate questions, models and hypotheses (Bryman, 2008). In many cases, the conclusions from inferential statistics extend beyond the immediate data alone. For instance, inferential statistics are used to try to infer from the sample data what the population thinks. Thus, inferential statistics make inferences from data to more general conditions; descriptive statistics simply describe what's going on in the data. Both types were used when analysing the quantitative data. Descriptive analysis was used first to summarise the statistics and the inferential analysis summarised the results. Alongside this, relationships between statistics were drawn out, for example relationships between gender and violence, years of service and stress, caseload and experience and so on.

Potential relationships were studied further in correlation to the findings from the quantitative data.

The tapes and transcripts taken from the semi-structured interviews were transcribed verbatim and additional notes were typed up. The transcripts and tapes were kept securely in a locked drawer. Nvivo 9 was used to help code the data. Originally, due to the small number of interviews conducted, data software was not going to be used to aid in the coding process. At a later stage it was decided that the interview tapes would be transcribed manually but data software would be used for coding. Nvivo 9 was chosen as the particular software package as this gave the researcher an opportunity to develop 'memos' as detailed below. The codes assigned to the interview transcripts were discussed at length with the supervision tutors for the PhD. A group discussion regarding the codes assigned and the patterns found was essential to ensure that there was no interviewer bias. Miles and Huberman (1994) provide a comprehensive framework for data analysis which is directed at tracing out lawful and stable relationships among social phenomena, based on regularities and sequences that link these phenomena. They name their approach 'transcendental realism' – this involves three stages, data reduction, data display, drawing and verifying conclusions. Miles and Huberman (1994) suggest that qualitative data analysis should first look to generate meaning and second undergo testing to confirm findings. Following their 'analytical moves' (Punch, 2009), codes were affixed to transcripts and notes, then the notes were examined for common phrases, patterns and differences, then patterns, commonalities and differences were set out in a database. Finally these databases of results were analysed against the theory that originally informed the study. The 'Miles and Huberman framework for qualitative data analysis' (1994) was utilised to describe and analyse the data gathered from the interviews and council case studies. This approach was chosen as it encompassed three different criteria to examining data. It gave clear and effective steps to presenting data that could be verified and summarised.

Firstly the data gathered was reduced through editing and then the data was displayed in forms such as charts, graphs and tables again compressing the results further. Finally the thesis offers a verification of results and draws conclusions from those patterns, from similarities and differences drawn throughout the coding and memoing stages of data analysis. The coding and memoing process presents the depth of this framework in practice; results are not simply coded but memos are kept to reflect the

thought processes of the researcher. The memos in this case were theoretical, personal and methodological. Memos support the coding system with a log of the researcher's conscious thoughts; it maps the researcher's reasoning and working ideas. These memos are presented in the thesis as part of the main findings.

There is also a distinction to be made between combining methods, combining data and combining findings. Miles and Huberman (1994) prefer the term 'linkage'. Linking the methods together means being mindful not to combine data thus making presumptions about what the combination might mean. The discussions chapter presented at the end of this thesis will not combine the data but instead will present all parts of the data giving an overall view of the institution, the team and the worker. The data will be analysed separately and then 'linked' together to present two separate data analysis chapters. Starting with an overall perspective of the institution, each case study will then present the findings on form and frequency within child protections teams, concluding with individual narratives of experience.

### **Ethical Considerations**

In accordance with the Royal Holloway University of London Ethics Committee, ethical approval is required for all research involving human subjects, including where there is no face-to-face interaction between researcher and participants. Participants must be protected from harm, their rights and dignity preserved as well as safeguarding their anonymity and confidentiality. These ethical considerations are all developed below as each of them shaped the approach, content and analysis of this empirical study.

It was decided that this research had the potential to provoke emotional responses which could affect the participants both during and after the study. As such in accordance with Royal Holloway guidelines, the College Ethics Committee were approached for approval rather than the departmental committee. The 'complete form' was filled out (as opposed to the simplified form) and sent to the college-board along with the consent letter, questionnaire and the semi-structured interview templates. Managers and directors of services were approached for their approval on behalf of the county council and this was approved after an explanation of the study, its aims, objectives and methodology.

## Consent

The principle of voluntary participation requires that people are not coerced into taking part in research. Closely related to the notion of voluntary participation is the requirement of informed consent. Essentially, this means that prospective research participants must be fully informed about the procedures and risks involved in research and must give their consent to participate (Bryman, 2008). Even when clear ethical standards and principles exist, there will be times when the need to do accurate research conflicts with the rights of potential participants. No set of standards can possibly anticipate every ethical circumstance and this must be balanced against protecting the rights of the participant and in turn the researcher.

In this study initial contact was made with the managers and directors of services in the county councils taking part in the study. Once consent was given by the managers, an invitation was sent, by email, to all child protection workers in their teams (see appendix 3). As part of this invitation the participant was asked to complete a consent form. The email detailed what the study entailed, researcher expectations and outlined the candidate's right to confidentiality and anonymity. After completing the questionnaire the participants were offered the opportunity to 'opt out' of the study again. If the participant answered 'yes' to experiencing violence then they were offered the opportunity to attend an interview. The participant was explicitly asked to sign a separate consent form stating 'yes I would like to take part in an interview' or 'no I would not like to be contacted further' to avoid confusion.

## Confidentiality

Under the Data Protection Act (1998) there are stringent guidelines which researchers must adhere to. As such this study undertook the following to ensure that participant's information was confidential and their rights were met legally. The participant's names and addresses were not stored on a hard drive nor was any letter correspondence. Identifier codes were used on data files and the list of participants was stored separately from their identifier codes in a locked cabinet. Previous research has indicated that anonymity may affect response rates positively as respondents may be more willing to respond without fear of answers being identifiable to them (Kiesler and Sproull, 1986). The participants were made aware of their anonymity in the consent letter and furthermore in the email sent with the questionnaire link. Transcribing was

completed by the researcher and therefore the transcripts and tapes were not shared with a third party. The transcripts, tapes, consent forms and any other documentation used as part of this study will not be kept for more than three years as this is seen as a reasonable amount of time after which there will be no further use for the records.

### **Strengths and Limitations**

There are several variables that need to be taken into consideration when planning a methodology. It is always beneficial to be mindful of those areas within the methodological approach that might limit the study or final results. The first set of variables were those surrounding the participants, for example, the computer literacy level of participants and their general literacy skills, including their competence when completing forms. The chosen sample group complete Section forty-seven reports, court reports, risk assessments and write case notes on a daily basis using computer software. Therefore this variable is seen as having little to no impact on the participants. Having said this, it has been recognised as a potential problem and to combat this there is section in the consent letter and questionnaire which reads: "If you need help completing the questionnaire or have any questions or concerns, please do not hesitate to contact: [the researcher]".

The second potential variable is time and environment. These might affect the respondents in the following ways; participants have limited time and a busy work schedule, problems with accessing the internet to complete the questionnaire online, participants discussing their responses with colleagues and participant reluctance to complete the questionnaire honestly whilst they were at work. As mentioned previously participants were emailed a link to an external online survey website, and as such the participants were free to send this link to their personal email account and complete the questionnaire at home. Taking this course of action was encouraged at both the team meetings and senior management group meetings. If participants were concerned regarding the above variable of time and environment then sending the questionnaire home or to an account that can be accessed outside of the office overcame the majority of problems detailed above.

Finally, variables that affect the research project could be the following; response rate, opting out of interviews and the interviewer/interviewee relationship. A one hundred percent response rate would mean that a minimum of two hundred questionnaires

would be completed and returned. Previous research shows this to be an unrealistic target. The aforementioned studies of Brown, Bute and Ford (1986), Norris (1990), Pahl (1999) and Broadhurst, Hawkins, and Briggs (2004) all received response rates of over fifty per cent. The methods used by these studies were drawn upon within this methodology with the intention of ensuring a similar level of response. Team meetings were attended to build a rapport with respondents and the manager's enthusiasm was helpful in encouraging staff to respond when the researcher wasn't present. Three emails were sent to prompt response. These emails included a countdown of days to the 'cut off point' for submission. After the submission date was reached an extension of two weeks was added to boost response rate. The questionnaire generated a fifty five per cent response rate. The questionnaire was sent to one hundred and thirty child protection workers and seventy-one responded (this meant that there were fifty-nine child protection workers across the two local authorities who did not respond). With regards to the interviewer/interviewee relationship, the pilot ensured to every possible extent that the interviewer presented as approachable, empathetic and actively listened and engaged the participants as such. Any issues with the relationship were recorded and reported in the data analysis section of this thesis.

When approaching the methodology these variables were taken into account, and where possible were measured and reduced if not eliminated. The biggest concern when undertaking the research piece was a low response rate; as previous research had shown limited figures, a wide spread and high response rate was essential. As an independent PhD study, there was no funding to provide incentive for the participants. Positive participation relied on good-will, personal interest and a motivation to create change. Personal variables for the child protection workers were taken into account and as such the questionnaires were not sent out on Fridays or at the end of the day, due to the busy schedules of the child protection workers. This was done in an attempt to encourage participants to respond at a time when they were not fatigued by the pressures of their day-to-day tasks.

### Reliability

In research, the term reliability means 'repeatability' or 'consistency'. Reliability of a methodology or results cannot be calculated, only estimated. A measure is considered reliable if it gives the same result over and over again, assuming that the item being measured isn't changing. This study has used current and relevant literature to

ascertain which approaches previously undertaken provide consistent and reliable results. Reliability is the extent to which any method of research will consistently deliver the same results when administered under the same conditions. In an attempt to estimate reliability the study used triangulation as a measure to replicate results. Triangulation embraces the methods of replication and includes the practices usually followed to estimate the validity and reliability of research findings. With respect to this the methods of relevant document analysis, questionnaire and semi-structured interview were utilised. The methodology, by process, analyses the institution for answers to the study's aims.

### Validity

When the questions, design and methods fit together, the argument is strong and the research has validity. When they do not fit together, the argument is weakened and therefore the research lacks validity (Gerring, 2001). Methods chosen and employed become the basis for criticising, rejecting and accepting items of scientific information. Validity should not be confused with reliability. Along with reliability, the modifier 'approximately' when referring to validity should always be used, since one can never know what is true (Seale, 2004).

By design this study has ensured that where possible variables do not undermine validity, as well as producing replicable and consistent results. By using the quantitative method of questionnaire, the delivery, the questions and the data gathering are all done in exactly the same way with each participant. Therefore the method overcomes the variables and produces valid, replicable results.

The same can be said for the qualitative method to an extent. Qualitative data, especially when conducting interviews can be open to interpretation and bias. Creating the semi-structured interview reduced bias as the same structure and questions were used for each participant. The interview process allows participants to expand on topics and for the interviewer to follow the respondent wherever their narrative on the topic takes them.

To obtain accurate information, the interviewer must be able to get respondents to answer fully and honestly whilst being mindful not to influence answers or give opinions. There was a fine balance to be found between steering the participant to

follow the structure of the interviews whilst being mindful not to lead them. It was anticipated prior to the interviews that conducting the interviews in the workplace might cause unease with some respondents. To compensate for this variable, the location for the interviews was decided by the respondent. The researcher was happy to make a home visit, invite participants to Royal Holloway to conduct the interview or to meet in a more casual setting of the respondent's choice. The interviews were all conducted in the council offices. The rooms were private and booked through an administrator in the name of the interviewer, therefore interviewee confidentiality was upheld.

Asking workers to recount episodes in their professional careers where they had been the victim of violence or abuse had the potential to evoke emotional responses from the interviewee. With this in mind, the content of the questionnaire and interviews reflected the sensitivity of the topic for the participant and was empathetically worded. As well as a considerably-worded questionnaire and interview the researcher was aware of their personal influence and tone, when addressing the participant and discussing provocative questions. Managers were approached at the beginning of the study and understood that participating could evoke feelings of distress or deep emotion for workers. Thus, in conjunction with immediate support offered by the interviewer, supervision or support was offered by the department in the long-term. As managers were approached with the study before the team, prior knowledge of the study meant that staff participation was expected but not guaranteed. This raised anonymity issues, as should a member of staff need to utilise supervision as a result of emotional distress caused by the study then the manager and institution would then know for certain that they participated. However, this does not necessarily present confidentiality issues as the participant does not have to share their personal responses. Should a participant approach their manager for support, then it was agreed with the council directors that an appropriate source of support would be found outside of the team or even outside of the organisation, thus maintaining some degree of anonymity for the respondent.

How can the validity of this study be further improved? Based on the sampling model, drawing a good sample from a population is essential. For instance, this study used random purposive selection. Alongside accessing a high level of participants, the study must present a set of results that reflect the highest response rate. When 'writing up' the results it must be made clear when discussing the generalisability of the results how these could be interpreted in different times, by different people in another place,



thus ruling out any 'grey areas' or areas of contention. In this case it was decided that the most effective approach would be to replicate the study in as many teams as possible, to ensure that an optimum number of child protection workers responded, as well as staggering the times that the questionnaire was sent out. This was done in an attempt to increase response rates. Low response rates are problematic within social research, especially in this study. This study will present its findings in a discussions chapter. The degree of generalisability is already low; as such a high response rate is essential to present the quantitative and qualitative findings together that provide examples which reflect significant similarities and differences, whilst highlighting processes that could be used in other councils.

## **Conclusion**

This chapter describes the thought processes and steps taken to construct the methodology. The methodology aims to develop strengths of previous research and explore areas of the subject that currently lack exposure. Current and relevant literature offers a limited analysis of the topic; therefore this methodology presents both an original approach and an up-to-date perspective. The research provides an in-depth analysis which presents individual perspective and experience. The objective of conducting this study is to note implications for policy and practice and to make suggestions for change in these areas. The combination of methods strengthens the argument, validity and reliability, whilst also offering an integrated view of institution, team and worker which can be linked to theory. The methods utilised reflect an ethically considerate approach. Consideration has been given to responses and every effort has been made to ensure a high response rate. To combat a low response rate the study employs a 'backup' plan. Besides raising awareness of the issues that affect social workers today, the aims of the study are to recommend improvements in current legislation and to inform contemporary academic theory. The study's findings could develop the idea that there is a link between the risk society thesis and the institutional dimensions of social services which in turn affect the child protection worker. The following chapter will present the first of the findings chapter. Chapter Four describes and analyses the council's policies and procedures.

## Chapter Four: Review of Council Policy and Procedure

*“One of my colleagues was trapped in a bedroom by a teenager at knife point for three hours and no-one in her team noticed she was missing ‘cos it was last thing in the day and no one noticed she was missing”  
(QSW, Council A).*

### Introduction

The proceeding four chapters will describe and analyse this study’s data. The thesis will now present a review of current policy, provide an account of the quantitative and qualitative findings and then finally examine the findings from all three methodological approaches. The following will provide an account of the policies employed by the two participating councils which focus specifically on the safety of staff. The council’s policies were broadly similar and therefore will be discussed together. There are three key areas of policy: prevention, protection and support of staff in relation to violence and abuse in practice. This section will describe the details of the council’s Health and Safety, Risk Assessment, Lone Working and Support policies.

### Council Demographics

Council A – is a unitary authority based in one of the Home Counties. It has the third lowest crime rate in the UK. It is the fourth most affluent area of Britain (statistics taken from the 2001 Census). Those residents living in poverty account for eighteen per cent of the authorities’ population (Deprivation Index, 2010). Residents receiving Job Seekers Allowance increased by fifty per cent during the recession and now accounts for three per cent of residents (Deprivation Index, 2010).

Council B - is one of the Royal Boroughs in England and Wales. There are currently two thousand, four hundred and thirty residents claiming Job Seekers Allowance (statistics taken from the 2001 Census). In the local population, twenty-two per cent are living in poverty (Deprivation Index, 2010).

### Relevant Employment Legislation

Legislation in this area is characterised by an inadequate, piecemeal and patchy approach. The Health and Safety at Work Act 1974 charges organisations and employers with the legal responsibilities of the wellbeing, good health and safety of all workers employed. The Management of Health and Safety at Work Regulation 1999

endeavours to support this responsibility with a duty of action required in the form of risk assessment. This regulation asks that organisations are not only responsible for the health and safety of employees, but that the employer actively assess, manage and review risk to staff. These practical measures, in retrospect, might now be viewed as a tokenistic gesture which has failed to deliver in the social work profession.

Alongside the Health and Safety at Work Act (1974) itself, there are other regulations which apply across all workplaces. The following have been selected from the broad range of regulations as those most pertinent and applicable to the child protection setting.

The Personal Protective Equipment at Work Regulations 1992 requires employers to provide appropriate protective clothing and equipment for their employees. With respect to child protection practices this would mean that employers would have to provide staff with mobile phones, personal safety alarms and any other equipment that employers felt appropriate to protect staff. Currently the two local authorities reviewed provide staff with mobile phones and personal safety alarms, their buildings are equipped with panic buttons and in one case security guards are employed. The Health and Safety Information for Employees Regulations 1989 stipulates that employers must display a poster telling employees what they need to know about health and safety. It was reported by staff taking part in this study that they were not clear of the health and safety regulations or procedures in place to support them. This could suggest that local authorities are not fulfilling this mandatory regulation.

Finally RIDDOR - Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 requires employers to record certain occupational injuries, diseases and dangerous events. RIDDOR is a central reporting system which keeps account of serious workplace accidents. This would include injuries incurred as a child protection worker. RIDDOR puts duties on employers, the self-employed and people in control of work premises (the Responsible Person) to report serious workplace accidents, occupational diseases and specified dangerous occurrences (near misses). Under EU law, employers and others with responsibilities under RIDDOR must still keep a record in an accident book of all over-three-day injuries. Employers and those responsible for health and safety will also be required to send the report of an over-seven-day injury within 15 days of the accident. These records need to be kept for at least three years after an occupational accident or injury (HSE, 2013).

It is unclear as to whether the councils taking part in this study are using RIDDOR. It is unclear because the councils did not appear to be properly using their own reporting methods and so therefore it would call into question whether they were using national guidelines. Staff reported that in the majority of cases incidents were not noted down. Two interviewees stated that they had noted incidents in the accident book at work, but this was also used for slips and spills, and staff felt this was an inappropriate reporting method after being punched in the face or held hostage (see Chapter Six and Seven).

### **Personal Safety Management of Violence and Abuse toward Staff**

The council's Health and Safety policy provides staff with guidance on the prevention of violence, handling of incidents when they occur, details sources of information and points of contact and offers a practical guide on personal safety.

According to the council's policies, both staff and management have responsibilities to prevent violence. The following procedures are utilised to prevent violence and abuse toward staff: risk assessments, training, awareness of potential causes of violence, sharing information and supervision. The policy details that:

"All managers have a responsibility to ensure that risk assessments are carried out and that appropriate action is taken to ensure the safety of their staff. This assessment must include all risks, including any potential risks from violence. This is not a once and for all activity; it must be monitored and evaluated" (Health and Safety Policy and Procedure document: P3).

Employees are then responsible for their own safety and that of others who may be affected by their actions. Staff must comply with risk assessments and safe systems of working within the council and as detailed by their employer. Furthermore, workers have a duty to report any shortcomings in the systems to the organisation. It was found in this study, that staff had reported shortcomings to their employers, however, organisations continued to utilise the same methods of recording and assessing.

Procedures set out how to handle incidents from the time of the incidents through to the aftermath. These procedures rely on the individual worker to execute the actions and the managers to support them. The procedures for frontline staff in handling volatile, violent and abusive situations are outlined to some extent in the Lone Working Policy, which will be discussed later in this section. In the aftermath of an event, the council's policy on 'reporting' should be utilised.

The reporting policy starts by highlighting the positives and negatives of encouraging employees to report violent incidents. According to the Health and Safety Policy, increasing awareness of potential risks to staff and thus encouraging reporting can keep staff safe but can also lead to fear which, “can increase out of all proportion to the actual risk. It is important therefore that the risks are put into perspective” (Health and Safety Policy and Procedure document: P4). The document does outline the importance of reporting violence for the council to gauge a ‘true’ understanding of what is happening in practice and is inclusive of aggression, vandalism, robbery, theft and the full spectrum of violent or abusive incidents.

The policy on reporting is somewhat conflicting in its guidance, as point 3.2 of the document states: “managers and staff must understand that just because they work in a certain type of employment they must not accept violence as ‘part of the job’” (Health and Safety Policy and Procedure document: P5). Yet the document moves on later to suggest:

“In general where an assault has resulted in actual injury, or where an employee has been seriously threatened, the police should be called. This action may not always be considered appropriate e.g. where a pupil has assaulted a teacher or a Social Care client a Social Care employee (or another client). In these cases appropriate discretion should be exercised” (Health and Safety Policy and Procedure document: P5).

This part of the document is confusing, as detailed in section 3.2 of the council’s Health and Safety policy is the assertion that all incidents should be reported, yet under the legal requirements as set out by the council, workers are asked to use their discretion when reporting actual crimes against staff to the police. This guidance directly conflicts with the aforementioned statement that staff should not accept this as part of the job. As a member of the public, violence and abuse should be reported to the police, why then as a professional is the same action not stipulated by organisations? Current literature agrees that workers are not sufficiently supported or encouraged when it comes to reporting violence and abuse (Norris, 1990; Pahl, 1999; and Weinger 2001).

The policy goes on to provide details of who to contact regarding violent or abusive incidents and provides practical guidelines for managers and staff which need to be taken immediately when a violent or abusive incident occurs. This includes items such as taking staff to hospital or allowing victims to take time off work to recuperate. This part of the policy does not include guidelines for those staff that have been threatened,

verbally abused, held hostage or harassed. This policy does also not detail what to do if the incident occurs after work hours, for example, on a late visit when managers or duty workers may be at home.

The policy on prevention and management of incidents to some extent puts emphasis on the worker and how they could have been responsible for causing the incident. For example, when recording and reporting incidents the policy details that the events leading up to the incident must be reported clearly. This individualisation of child protection workers and the apparent need for accountability links to Beck's theory and further underlines current literature suggesting that child protection workers are undermined (Lupton and Gillespie, 1994 and Pahl, 1999). This section will now present the policy on risk assessments and the procedures set in place to assess risk.

### **Risk Assessments**

The risk assessments employed by the council are inclusive of all forms of violence and abuse. Categories include: a worker being attacked on the way to a visit, either on foot or getting out of car / road rage; a worker attacked in the client's home; a worker under threat from animals in the home; abusive or difficult phone calls; and personal safety during out-of-office visits. This inclusive definition is encouraging as literature would suggest that social service agencies do not acknowledge verbal abuse as damaging or violent (Breakwell, 1989; Norris, 1990, Littlechild, 2003, Littlechild, 2005 and Littlechild, 2008).

It is the manager's responsibility to ensure that members of their team are filling out risk assessments and that information is being shared amongst professionals. It is also the manager's responsibility to ensure that risk assessments are adhered to when the risk assessment 'flags' a potentially violent or abusive scenario. Therefore it is the responsibility of staff to complete risk assessments thoroughly, update them where necessary and to share information with colleagues where appropriate.

Currently risk assessments are kept on the internal database, which can only be seen by social workers. A frustration felt by staff was the lack of sharing of risk assessments between partner agencies, for example, mental health colleagues and the Police. Staff reported that risk assessments were not freely shared amongst agencies where they should be to protect individual workers. It was also noted that all risk assessment forms

are different and therefore some forms do not gather all the information needed. It was felt that due to the 'tick-box' nature of some of the forms that workers could firstly not expand on the details of risks, and secondly could not fully appreciate the extent of risk by noting a simple tick.

Risk assessments, as used by the councils involved in this study, scale the risk 1, 2 and 3 (see appendix 6). The scale is in place to highlight the severity of the risk and the likelihood of this happening. This would then highlight areas where joint working needs to be undertaken or where workers need to take extra caution and care. The Lone Working Policy details how staff should implement this caution and care after completing a risk assessment. The following gives a detailed account of the LWP (Lone Working Policy).

### **Lone Working Policy**

The Lone Working Policy (LWP) applies to any employee who is: making a home visit; transporting a young person by car; driving to a venue; working with homeless young people; working with or meeting volunteers; or working at a centre or office. The LWP details that in advance of all planned visits the employee's line manager must be given the following information: the time and location of the visit; the telephone number of the premises; and the expected duration of the visit. These details should be recorded in an appropriate place and the example given in the policy document is a book or a diary. The LWP stipulates that all workers must always be in possession of a mobile phone (provided by the council) whilst undertaking lone visits and that the phone must be switched on.

The LWP demands that there is a 'key contact' at all times and on occasion this might not be the direct line manager but a duty worker. This key contact must hold details of the mobile phone number of the visiting lone worker, the contact numbers of the lone worker's line manager, the time, duration and location of the visit and the telephone number of the premises to be visited. In Council A and B, workers would keep a record of home visits on their online calendars and in some cases whiteboards (whereabouts boards) were still in use.

The LWP moves on to detail social workers' responsibilities and guidelines on what to do when lone working. The policy states that when trying to summon help during a visit

the worker must call the 'key contact' and use an agreed alert word or password, for example, 'I need to cancel my appointment with the Chief executive'. This procedure was being actively employed in both councils, as per the interview and questionnaire data, however, one shortfall found was that staff were not always aware of the code. If the visit runs smoothly then the worker must call the key contact to state that they are safe and have finished the visit. If the lone worker has not telephoned the key contact fifteen minutes after the expected duration of the visit, the key contact must telephone the worker to establish that there are no problems. If there is no response, a message should be left on the answer phone facility of the mobile phone explaining that contact is being sought. If contact with the lone worker is not possible, the key contact must then directly inform a line manager, who will be responsible for alerting the authorities. The LWP therefore covers all movement of workers and stipulates safety measures at all points of contact with the client. However, the Lone Working Policy, is only as good as the person executing them in practice, as with all the policies detailed above.

### **Support Procedures**

Council A and B both employed the same support procedures for those staff who had been victims of violence or abuse at work. The support 'packages' offered by the councils were restrictive and minimalistic. In the first instance, both local authorities offer regular supervision provided by line managers. In the event that staff feel they need more support, or a therapeutic and anonymous support, then they can access counselling via a service drafted in by the council. The counselling service in both cases was telephone support. This was highlighted in interviews as inappropriate and insufficient by staff (see Chapter Six and Seven). The counselling service offers six free sessions to local authority staff. Staff can access this service by calling the counselling direct line, and this contact number can be found in the staff handbook, intranet or on posters.

With regard to physical injury, staff would be offered support from the occupational health team. Child protection workers are referred to this service by their line managers. This service is used when a member of staff has been signed off work as a return to work procedure and/or when a member of staff is incapacitated and needs practical and physical support to work. It is also a service which deals with members of staff who are feeling mentally overwhelmed with work and need practical ideas as to how to better manage their time and caseload; in some cases occupational health



might advise light duties or a change to the worker's working week and hours. Although workers who had been physically attacked and sustained injury were interviewed, none of the staff reported having been referred to this service.

## **Conclusion**

The policies detailed above demonstrate that councils do employ procedures to deal with staff safety. These policies are detailed and offer support to staff before, during and after violent or abusive incidents. Support is offered in the form of training, information, managerial responsibilities, supervision and professional duties to follow detailed procedures. These procedures, however, are contradictory in some cases. Where staff are encouraged to report all violent and abusive incidents the policy then states that if you are a social worker you are to use your discretion as to whether to report an assault to the police. Surely an assault is a crime whether perpetrated against a social worker, teacher, nurse or receptionist, why is the council therefore not stating that all incidents must be reported to the Police by staff? Here it would appear that the institution is characterising risk as less significant when a social worker is the victim. In singling out social workers when detailing the procedure for reporting assaults and differentiating them from other colleagues within the organisation it appears that social workers are not as important as other staff or indeed that assaults against social workers are not taken as seriously as other incidents. Child protection workers' experiences and understanding of these policies and procedures will be discussed in the following chapters. The following chapter will present the quantitative findings from the online questionnaires.

## Chapter Five: Quantitative Data Analysis

*“As the child’s welfare is the significant issue, workers often ‘put up’ with verbal aggression so that assessments and work with the children can be undertaken” (Manager, Council A).*

### Introduction

This chapter offers an analysis of the quantitative findings. The quantitative data is the product of the online questionnaire and the responses have been interrogated using SPSS. Cross tabulations and frequencies were run to formulate statistics and assess question ‘x’ in relation to question ‘y’. Particular findings were selected during the cross tabulation process with respect to the study’s four key concepts. Findings in this chapter support those of the original hypothesis, that the impact of violence and abuse is negative. Furthermore, these findings highlight underreporting and an almost daily experience of verbal abuse.

The structure of the chapter reflects that of the online questionnaire layout. This rationale provides an overall context of the form and frequency before discussing impact and worker experience. The chapter begins with an overview of respondent demographics and moves on to a discussion regarding the extent of the problem in practice (form and frequency). Finally the chapter analyses how this form and frequency affects service delivery and approach, impacts on the worker personally and how in turn these variables influence reporting and procedure.

### Section 1 – Respondents

The questionnaire was sent to one hundred and thirty child protection workers and seventy-one responded. This equates to a fifty-five per cent response rate. Compared to the studies analysed in the literature review this is a higher than average response rate (see appendix 4). In England, male workers in child protection amount to thirteen per cent of the total workforce (GSCC, 2010). This is reflected in the statistical difference between gender responses in the questionnaire. Taking into account the figures above there was a fifty per cent response rate from males to the questionnaire. Overall, there were sixty-three female respondents and eight males. The majority of workers (fifty-five per cent) had been in their current post 0-2 years and had been practising social worker for 0-5 years (see appendix 5 figure 0.1 and figure 0.2).

The majority of respondents were qualified social workers. However, there were seventeen respondents who had been practising between 0 and 2 years thus suggesting that there were more than three newly qualified workers (see appendix 5 – figure 0.3). The literature suggests that students, social work assistants and newly qualified workers are more likely to experience violence and abuse due to a lack of ‘frontline’ experience (Brown *et al*, 1986). There were eight respondents who had no qualifications or were in training. This point will be developed later when looking at how years of practice/experience might be relevant to the frequency of violent or abusive incidents. Also of interest are those workers who have been in their current team for six years or more. There are approximately four workers who have been practicing in the same team for more than ten years. What impact does this have on workers’ responses to violence or abuse? Research suggests that child protection workers have a high ‘burn out’ rate, which is reflected in the statistics presented above (Littlechild, 2005). On average, workers spend three years practising in child protection teams (Community Care, 2009). This could mean that workers who have been in child protection for an above average amount of time have become desensitised to violence and abuse.

The recommended caseload within both councils taking part in the study was ten to fifteen cases. The statistics demonstrate that most respondents were holding over the recommended caseload, with most workers holding in excess of twenty cases, a minority of twenty-three per cent were holding the recommended caseload (see Appendix 5 – figure 0.4). Holding an above-average caseload can have implications for a worker’s capacity to manage risk because they are too busy to complete necessary risk assessment forms or do not have enough time to read case files before conducting home visits. This could lead to an increased risk of exposure to violence and abuse. Large caseloads can also have a direct affect on the content of supervision, for example only having time to discuss case management, taking the focus away from personal feelings, issues with health and safety or ideas on personal development. This can personally affect workers in terms of stress and fatigue, potentially leaving a worker less resilient and more susceptible to ill-health (as demonstrated in the qualitative data). In relation to caseloads workers were asked if they were working with clients who held criminal convictions. Of the seventy-one workers asked, seventy-seven per cent of workers were working with convicted criminals. Overall, a minority of fourteen workers had no clients with a criminal conviction.

## **Section 2 – The extent of the problem**

### Explanation of questions posed

The first section of the questionnaire aimed to ascertain the form and frequency of violence and abuse in child protection. An initial question regarding form was followed by a frequency question. For example, 'have you ever been verbally abused by a client?' (Multiple choice answer; yes or no) was followed by 'how often do you experience verbal abuse at work?' (Multiple choice answer; daily, weekly, monthly and other).

There was an intentional focus on verbal abuse as it was overlooked in previous studies (Norris, 1990; Bowie, 1996 and O' Hagan and Dillenburg, 1996). Being 'exposed to' verbal abuse and being 'directly verbally abused' were specifically separated in an attempt to understand how exposure might heighten workers feelings of fear and stress.

In order to differentiate past experiences from recent and relevant incidents, respondents were asked to answer the questions based on their experiences during the past two years thus relating those to current policies. The questions cover the full spectrum of violence, starting with verbal abuse and including questions on intimidation, threatening body language, actual physical assault, criminal damage, harassment, stalking, sexual abuse and written or internet abuse. It was imperative to be inclusive of all types of violence and abuse as this was not the case in previous research. This helps to gauge what is seen as violent or abusive behaviour by child protection workers as well as provide an overview of practice realities.

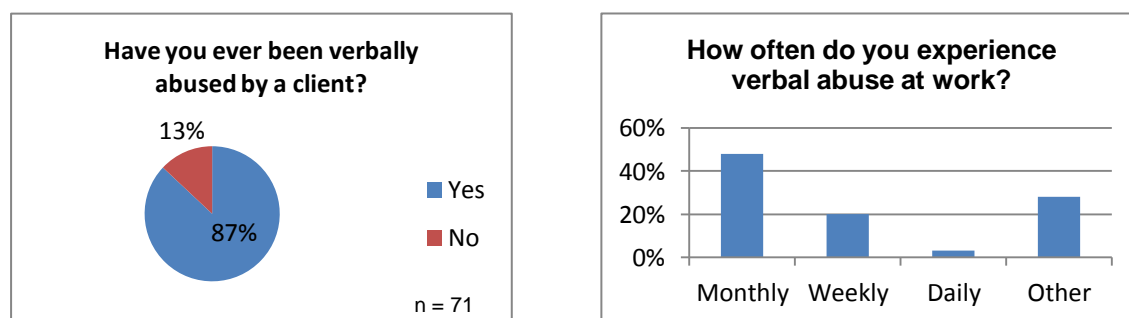
### Results

The following section provides a brief commentary on the results of each question; a more thorough analysis of the common themes and contributory factors follows later in an 'analysis' sub-section.

When asked about indirect exposure to swearing, the results showed that almost all child protection workers should expect exposure to a client swearing in the line of duty (see appendix – figure 1.0). It is therefore significant that seventy-three per cent stated that they were left feeling intimidated and threatened when clients exhibit this type of

behaviour. Most commonly this was experienced on at least a monthly basis equalling sixty-nine per cent of workers. A small percentage of workers experience this on a daily basis.

Figure 1.1



('Other' - infrequently 6, every 6 months 3, once a year 1, dependent on client 3, frequently 4)

The statistics in figure 1.1 illustrate that nine in ten workers are being verbally abused. A total of eighty-seven per cent of respondents have been verbally abused. Thus only nine of the workers who had been exposed to a client venting frustrations had not experienced verbal abuse. In only a minority of cases venting frustrations did not lead to a client verbally attacking a worker.

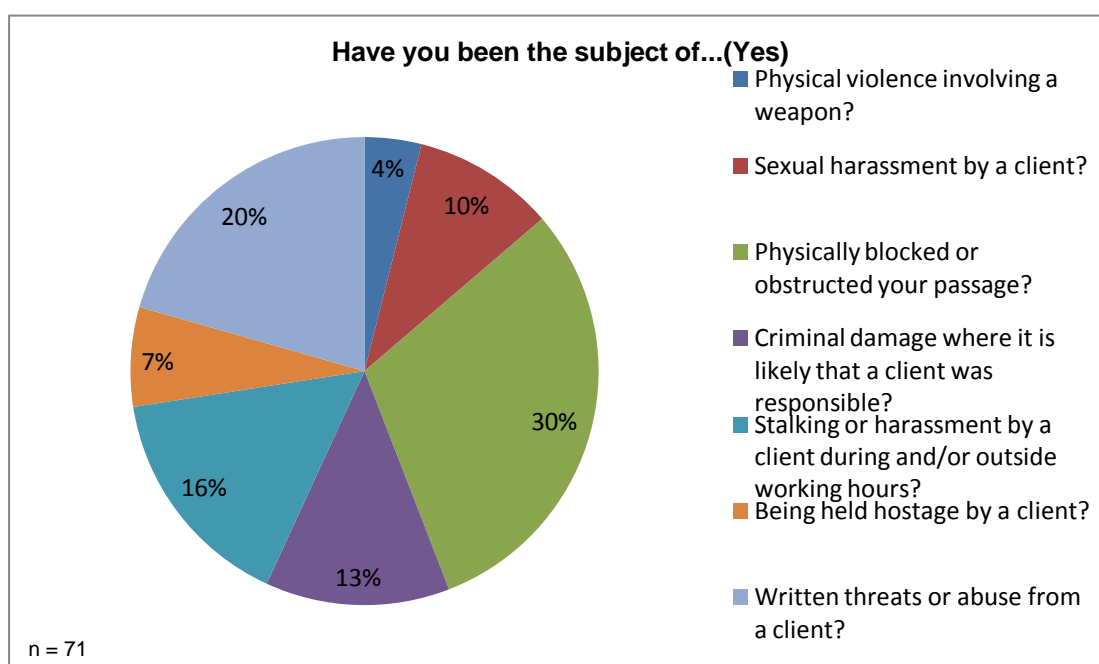
Nearly one in two workers are being directly threatened with physical assault or harm. Most experience this kind of behaviour infrequently (monthly or less) and usually as a result of specific cases (see appendix – figure 1.2).

The statistics gathered showed that four in five workers were being subjected to threatening body language representing a large proportion of workers (see appendix 5 – figure 1.3). A minority of fourteen workers had not experienced threatening body language. In most cases this happened on a monthly basis, with the potential for more frequent episodes if a worker is handling a difficult case or client.

In the last two years, seven per cent of workers have been the subject of physical violence or assault by a client. In contrast to verbal abuse, where nine in ten workers are being abused, physical abuse affects one in ten workers at work. This statistic is low in comparison to the findings of other studies (Breakwell, 1989 and Broadhurst *et al*, 2004) who found that one in four workers were being physically attacked, (twenty-four per cent). However, these studies had a higher response rate. Figure 1.4 shows an interestingly negative response rate for physical violence; further statistics for those

sexually harassed, obstructed or threatened with a weapon show that incidents of this kind do not correlate to a figure of only five physical assaults. This leaves a question mark over what is accepted, reported and understood as violence in social work. Having said this, it could also be argued that perhaps the respondents did not understand the questionnaire clearly. This will be taken into account when evaluating the findings.

Figure 1.5



Finally, respondents were asked to answer regarding seven predefined examples of violence and abuse. This section found that one in ten workers had been sexually harassed and all of the victims were female; one in four workers had been blocked or obstructed when leaving a property; one in five had been stalked or harassed by clients, or received written threats. Figure 1.5 highlights that when the questions became more prescriptive (providing the respondent with actual examples) more workers reported being the subject of violence or assault by a client. In the past two years, there were seventy-two incidents of physical violence. This means that either all workers had experienced violence or that some workers had experienced violence on more than one occasion.

## Analysis

When analysing the data there were four main contributory factors which affected the form and frequency of violence and abuse toward child protection workers. These were 'gender', 'experience', 'current role' and 'working with convicted criminals'. Below is an explanation of how these factors contributed to violent or abusive situations.

### *Gender*

A cross tabulation was run to ascertain if there is a relationship between form and frequency and gender experiences. The cross tabulation suggested that female workers experience indirect verbal abuse more than males. There was an eight per cent difference in gender experiences of verbal abuse (male eighty per cent and female eighty-eight per cent). The majority of males were exposed on a frequent basis which matches female exposure. However, one male and three females selected 'other' and described their experiences as frequently. These statistics raise questions as to why women are more frequently exposed to indirect and direct verbal abuse. Is this based on societal values? Are the perpetrators male and therefore can a link be made between females working with issues of domestic abuse?

Whilst females are more likely to be verbally threatened, males are physically obstructed or challenged. Following this trend more females were directly threatened with physical assault or harm than their male counterparts. More men were subject of threatening body language; there was a ten per cent difference between male and female responses. There was no significant gender difference in frequency of experience. To some extent this statistic relates to research findings that females are most usually verbally abused whilst men are more likely to be physically attacked (Lupton and Gillespie, 1994).

In terms of actual physical violence one male and six females were assaulted. The male was pushed and shoved. Females experienced punching, kicking, grabbing, pushing and shoving. One worker reported that a trap had been set by a child. This means ten per cent of men and nine and a half per cent of females experienced physical violence, thus there was minimal gender effect. The literature reviewed stated that females were less likely to experience actual physical violence (Brown *et al*, 1986) yet here females describe being physically struck and assaulted. The sample group for

this study is smaller (seventy-one respondents) to those undertaken in current research. Could this therefore suggest that if a larger sample group were questioned that there would be a greater number of females being attacked as opposed to those statistics from the early twenty-first century?

Three females were subject to violence involving a weapon. It would appear that weapons are also used as a form of intimidation. Seven females were sexually harassed, while interestingly no males had experienced this. Eleven females were stalked or harassed by clients and five females were held hostage by a client. These incidents could be an area for policy development and training, as sexual harassment, stalking and being held hostage emerge as a predominantly female experience.

Those workers who have been physically blocked or obstructed by a client equated to three males and nineteen females. A similar division can be seen in those workers whose possessions were subject to criminal damage caused by clients (twelve per cent were female and ten per cent male) and workers who received written threats (twenty-five per cent of males and twenty per cent of females). Therefore gender is not a significant factor in these experiences.

In terms of experience there is generally an even trend between male and female experiences of violence and abuse. This differs from the findings of previous studies; the minimal difference in gender experience will need to be further explored later in the thesis. Therefore these findings mean that there is little to no worker effect in violent or abusive situations. Hence, it could be argued that systems, circumstance and environment are the cause of violent or abusive situations rather than the individual.

### *Experience*

There was a balanced response in respect to the threatening body language and how long respondents had been a practising social worker. Here it is clear that role plays a significant part in the severity of violence and abuse. Verbal abuse is experienced at all levels. However, qualified social workers experience a greater degree and a more 'physical' aspect of violence and abuse. This could potentially be caused by lone working and ineffectively managed home visits. The data from this study indicates that more qualified workers were threatened with physical assault or harm potentially because they hold complex and challenging cases. Qualified workers undertake



Section 47 investigations (investigating whether a child should be subject to a child protection plan) and court work, therefore making more significant decisions on cases, as opposed to a social work assistant or student for example. This correlates with current research as reported by Broadhurst *et al* (2004) which states that certain activities and tasks carry more risk. Workers most usually described their violent experiences in their current role as happening 'rarely', 'infrequently' and 'dependent on client'. However, those workers that selected predefined answers responded 'frequently'.

With regard to actual physical violence the seven per cent of workers reporting incidents were newly qualified workers and workers who had been practising for more than ten years. Does this suggest complacency at either end of the scale? Are newly qualified workers simply unaware of the dangers whilst experienced workers have become complacent in assessing risk? In all cases it was a qualified social worker that was physically attacked. The majority of occurrences happen towards those workers with at least six to ten (or more) years of experience, suggesting that risk of and actual violence affects all workers regardless of extensive experience in practice, training or skills. This is assuming that workers' training is up to date. Alternatively this could imply that experienced workers handle complex cases, have more confidence in practice, therefore they are more likely to challenge difficult clients and so consequently are at greater risk.

### *Current Role*

The findings showed that there was a connection between the length of practice, current roles, and violence and abuse. Initially this highlighted that, statistically, newly qualified social workers (twenty-six per cent) and workers practicing for ten years + (thirty per cent) are more likely to be exposed to a client venting frustrations. This accounts for over half of the incidents recorded. Why is this – has the worker been in practice too long or are they more skilled and therefore open to allowing clients to vent? This will be developed alongside qualitative data in the discussions chapter.

In relation to 'current role' it appears that all workers are exposed to a client 'venting' regardless of role. These incidents took place on a weekly to monthly basis, four workers reported that it happened on a daily basis. There appears to be no real correlation between roles or years of practice with respect to verbal abuse, although

interestingly even managers who have limited direct contact with clients reported experiences of verbal abuse. Workers practising for 0 - 5 years have experienced the majority of verbal threats (thirty-six per cent). However, in general, the results were fairly balanced both between length of practice and those who have and have not been verbally threatened. Managers and qualified social workers were the most likely to experience verbal threats on a daily, weekly and monthly basis. Senior practitioners experienced this on a monthly basis. Being an experienced worker does not necessarily mean they are more capable of diffusing an abusive situation nor are they less likely to be exposed to threatening clients. Interestingly, managers and qualified social workers were more likely to be threatened; this suggests that a workers role is more indicative of violent or abusive situations than years of practice.

### *Convicted Criminals*

One common factor in all of the statistics gathered regarding form and frequency of violence and abuse was clients who are convicted criminals. This was highlighted in every category as a contributory factor, firstly, to the number of incidents but moreover to the intimidation, fear and threat felt by workers. The data was cross tabulated to test whether being indirectly exposed to a client venting frustrations was more common where the client was known to be a convicted criminal. This found that workers are more likely to experience abuse if the client is a convicted criminal (seventy-four per cent). Where the client wasn't a criminal, only two workers had been exposed to a client swearing. Workers experienced this on a monthly or weekly basis so while working with convicted criminals did not increase the frequency with which this was experienced, it did mean that workers were more likely to experience bad language and swearing.

With regard to verbal abuse, where the client was not a criminal a minority of three workers were verbally abused. Therefore workers are more likely to experience abuse when the client is a convicted criminal. As such, workers are more likely to experience verbal abuse on a more frequent basis when working with convicted criminals. The majority of workers reported feeling intimidated on a monthly basis.

In relation to threats of physical assault or harm and actual physical violence the findings highlight that working with convicted criminals increases the potential risk to workers. Where the client was not a criminal seven workers had not been threatened.

This reiterates the earlier analysis that you are more likely to be threatened with physical harm or assault if you work with convicted criminals and again this is a more frequent occurrence. In ninety per cent of physical assaults the perpetrator was a convicted criminal and this corresponds to findings from the literature review (Stanley and Goddard, 2002). In only one case, where the client 'kicked' the social worker, the person was not a convicted criminal. These statistical findings clearly establish a link between violence, abuse and criminally convicted clients. Working with convicted criminals increases risk to worker in all forms of violence and abuse and in some cases it increases the frequency of incidents. Moving forward, this can be used to some extent to predict and/or prevent violence and abuse from occurring. Joint working with the police to establish a client's criminal history and then planning visits accordingly could go some way to increasing worker safety, in turn building worker confidence and decreasing the personal impact of stress and anxiety on the frontline.

### **Section 3 - Affect, Impact, Reporting and Procedure**

#### Explanation of questions posed

The final section of the questionnaire focuses primarily on the agency, their response to violence and the relationship between workers, managers and policy. It also looks at the personal impact of violence and abuse and the feelings that such experiences elicit.

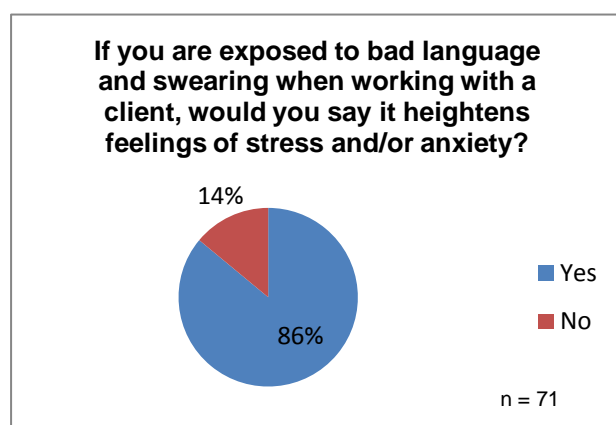
Questions in this section were intentionally brief; those respondents that had experienced physical violence would be asked to expand on topics discussed in the questionnaire during the interviews.

This section presents statistical data on prior knowledge (affect), case approach (impact), understanding of procedures and reporting. Workers were asked to define how prior knowledge affected them, reporting and furthermore who they would report to. In the event that they experienced a violent incident questions around feelings were asked in relation to the different forms of violence.

The data is presented in tables with a short analysis of the findings. This is followed by an 'analysis sub-section' which examines the themes emerging from the data set.

## Results

Figure 2.0

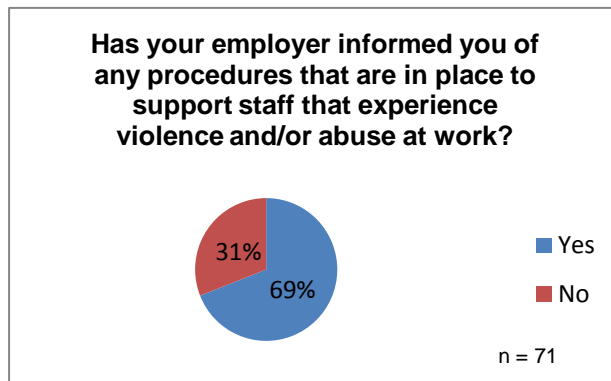


If exposed to bad language and swearing would it heighten feelings of stress and anxiety? According to eighty-six per cent of respondents it would, therefore a large percentage of workers would have heightened stress and anxiety levels prior to approaching a potentially violent or abusive situation.

In figure 2.1 (see appendix 5) fifty-one per cent of respondents answered that prior knowledge affects them positively. This answer is further supported with forty-one per cent suggesting that prior knowledge helps them plan and prepare for a visit.

'How might you change your approach to case management when you are working with a client who is known to be potentially violent or abusive'? There is a clear change in approach when the client is a convicted criminal (see appendix 5 – figure 2.2). In thirteen cases workers would ask a co-worker to work with them; in twelve cases workers would ask a colleague to co-work, avoid home visits and conduct the meetings in the office; in seven cases they would do all of the above but also would avoid unnecessary contact with client. In fact in twenty-three per cent of cases the worker would avoid contact with the client (in two per cent of these cases the client was not a criminal).

Figure 2.3



Nearly seventy per cent of workers have been informed of procedures to support them in the event of a violent or abusive incident at work. Although over half the respondents had been informed of procedures, there were a small percentage of workers within this number who still remained unaware of how to actually access said support.

### Analysis

The second section of the questionnaire looked to gather data with respect to prior knowledge, procedures, approach and reporting. The analysis that follows highlights significant correlations between feelings, prior knowledge, approach, reporting and acknowledgement of violence and abuse in practice. These links reinforce earlier findings that convicted criminals directly affect case management and approach. Connections can also be drawn between form, frequency, feelings and prior knowledge.

### *Feelings*

Findings show that being exposed to bad language (i.e. not directed at worker) and swearing heightens workers' levels of stress and anxiety. This identifies an underlying fear and feeling of intimidation amongst child protection workers that is reportedly present in frontline practice. Being exposed to verbal frustrations, abuse and threats is commonly experienced on a daily to weekly basis. Thus the extent of fear and feelings of stress and anxiety can be aligned to these time frames. In the majority of cases the threat of physical harm or assault does not materialise into actual physical violence, emphasising that fear is ever-present but the likelihood of actual violence is not. This idea will be developed later in the thesis.

The same is the case for those who had been verbally abused. Of those people who were verbally abused by a client, seventy-three per cent were left feeling threatened, intimidated or fearful as a result. Where clients were convicted criminals the majority of workers (eighty-two per cent) were left feeling frightened, intimidated and fearful. In comparison, seventeen per cent of workers had felt the same feelings where their clients were not convicted criminals.

When asked whether being threatened with physical assault or harm left participants feeling intimidated, twenty-two workers whose clients were convicted criminals agreed that it did. The percentage of workers not working with criminals but experiencing similar feelings was comparable, with fourteen responses. This suggested that being threatened with physical assault had an emotional impact on the worker regardless of who was making the threat, or the perpetrator's background. It could therefore be suggested that the systems in place do not make workers feel safe and secure, as feelings appear not to be dependent on the perpetrator. Are these reports being taken as seriously as the worker feels them to be?

One of the central aims of this study is to understand how these feelings are managed in practice and this will be developed in the concluding chapters. When being threatened by a client it would appear that the impact is personal to the worker and not dependent on the client. This emphasises a disparity between workers' feelings of fear, intimidation and threat and the number of actual violent or abusive incidents. Subjects of physically threatening body language were more likely to feel intimidated if the client was a convicted criminal. These feelings could be linked to a convicted criminal's prior offence(s) and therefore a worker's prior knowledge. For example, this person is capable of following through the threat as they have a previous conviction for grievous bodily harm. This supports the earlier notion that, if working with convicted criminals was managed more effectively this could reduce workers' anxieties.

To further develop the findings above, the data was analysed to assess whether the length of time in practice made workers more resilient to the impact, affects and feelings of violence and abuse. 'How long have you been a practising social worker' was cross tabulated alongside 'feelings' to ascertain if there was a correlation between experience and feelings. Being exposed to bad language showed no correlation and illustrated that even the most experienced workers felt intimidated and fearful, as the results were evenly spread.

Verbal abuse differed slightly in that there was an even spread of responses. The majority of workers experienced negative feelings as a result of verbal abuse. However, these results were more inclusive of newly qualified workers, as well as those staff with more than ten years in practice. Where workers were exposed to verbal abuse, the majority of these incidents involved a convicted criminal. Those workers directly threatened with physical assault or harm reflected similar results to those who had been indirectly exposed to bad language. The majority of workers were left feeling threatened, intimidated and fearful. Those workers who were intimidated by a client's body language felt intimidated and fearful regardless of years in practice; however, fewer newly qualified social workers experienced this than workers with more than ten years' experience. According to these findings the length of time a worker spends in practice does not mean that they are more resilient to feelings of stress, anxiety and fear as a result of violence and abuse. Therefore training, policy and systems need to account for every worker regardless of their experience.

### *Prior Knowledge*

The responses in this section were not anticipated by the researcher and thus provide an insight that differs from the original hypothesis. The original hypothesis was that prior knowledge may increase feelings of stress and anxiety. Statistics gathered would suggest that in some cases prior knowledge can help alleviate these negative feelings. These workers actually found prior knowledge helpful and some suggested that this led to a more pragmatic approach. The results also show that regardless of how violence and abuse made a worker feel they would still report serious incidents. For most workers (fifty-one per cent) prior knowledge raised awareness of potential risk factors, meaning they were prepared. In turn, as a risk had been flagged, workers had already reported concerns prior to any potential incidents.

Data was tested to explore this finding and a cross tabulation was run to assess whether a worker feeling 'intimidated, threatened and fearful' was ultimately left feeling positive in terms of the prior knowledge this provided. In most cases there was very little statistical difference between workers being affected positively and negatively by prior knowledge of clients and their feelings of intimidation, threat or fear. For example, being indirectly exposed to a client venting frustrations affected workers positively in thirty-five per cent of cases, whilst twenty-eight per cent felt it had a negative impact, and seven per cent workers stated that it did not affect them when they were exposed

to such scenarios. Prior knowledge in some cases therefore helps workers manage risk, personal impact, affect and feelings. There is still a fine balance between prior knowledge leading to a positive or negative experience in practice. Therefore a dependence on this to alleviate stress, intimidation or fear would be deceiving.

### *Approach*

The findings relating to case management and professional approach are concerning. Where there is a potentially violent or abusive client, the majority of workers are reportedly avoiding contact with these families. In 'extreme' cases this could potentially lead to a child death or a worker inaccurately assessing the risk to a child due to fear or intimidation caused by a family. There are several well documented examples which received wide coverage in the media e.g. Victoria Climbié or Baby P. Moreover, with prior knowledge of risk, fifty-four per cent of workers would avoid home visits (regardless of whether the client was a criminal or not), as opposed to in twelve per cent of cases where the client was not a convicted criminal. It is important to note the difference between convicted criminals and those clients who are not, as this seems to increase worker avoidance. If a client is a convicted criminal then the child protection worker would be informed of this prior to visiting the family. Why then, if this forms part of the risk assessment, are home visits being conducted in the office and why are workers avoiding contact? This point will be developed later in the discussions chapter. This suggests that prior knowledge and risk assessments are not being managed effectively. Contributing factors could be ineffective policies, managers not following procedures or large caseloads. Only two workers who selected the 'other' option stated that they would not avoid home visits.

With respect to feelings of intimidation, threat or fear and approach, it appears that feelings did affect the workers' case approach. Where workers were left feeling intimidated and fearful the majority would change their professional approach and avoid home visits, seeing clients in the office and asking a colleague to co-work the case; this accounted for forty-two per cent of responses.

Tools used to assess risk were: risk assessments (see appendix 6), discussion with manager or colleagues, and case notes. Some respondents stated that there were no risk assessment forms and that they "weighed up the risk in their mind with no discussion". These workers were not using any of the tools implemented by council



procedures. If workers were exposed to bad language and swearing, where this heightened worker stress and anxiety, in the majority, workers would change their approach to the case. Workers in the majority would avoid home visits and unnecessary contact; they would work with a colleague and hold appointments in the office. With respect to serious case reviews, e.g. Victoria Climbié and the Lord Lamming report, this study found that there were thirty-one per cent of respondents who stated that they would still avoid home visits. Instead of avoiding home visits, only five per cent would ask a colleague to co-work the case.

### *Reporting*

Of the ninety-nine per cent of respondents who stated they would report a violent or abusive incident at work, only forty-four per cent would report to their manager while fifty-three per cent would report to informal support networks. This statistic could potentially support the notion that violence and abuse are underreported. Initially the statistic would appear to suggest that all violence is reported, however upon further inspection incidents are not necessarily reported to the right people or using the correct procedures, for example, reported to a manager using an incident form. The only person who would not report was a female.

There was a gender difference in who the male or female worker would report to. Workers would mainly report to their line manager; however males were less likely to report to a spouse or friend, with only two males reporting to colleagues. Females, in the majority of cases, would report to a line manager, colleague, spouse and personal friend. The majority of males would report to their line manager and to no one else. This may show different coping strategies between males and females. Females are more likely to report to a range of confidants such as a friend, partner, manager or colleague. Six people selected 'other'; two people stated that they would use an incident report (see appendix 7), one stated that they would only report physical violence and three people said they would report to the police but only if necessary. In relation to the extent of physical violence more than three police reports should have been filed. There is a definite relationship between what is seen as violent, whether an incident is seen as significant enough to report and therefore whom it is reported to. It is concerning that workers do not see sexual harassment, criminal damage and physical assault, for example, as incidents worthy of reporting to the police. Statistics relating to incidents which workers felt were 'reportable' are developed in the qualitative

chapter. This questions whether workers have a different code of what is morally right and wrong between work and in their personal life. These issues are explored further through qualitative analysis.

### *Support*

When analysing data gathered regarding approach and reporting, it became apparent that support was an interlinking factor in both. Similarities occurred which linked workers feeling supported in practice and being aware of tools used to further support themselves. A cross tabulation was run to see if there was a correlation between reporting and support systems. This found that fifty-three per cent of workers who would report know how to access professional support. The respondent who said they wouldn't report also didn't know how to access support. Although this only accounts for one per cent of respondents could this highlight a link between a lack of knowledge and not reporting? There were a further seventeen respondents who would report violence or abuse but did not know how to access support. Although ninety-nine per cent of respondents stated that they would report violence, only seventy five per cent knew how to access professional support. This supports the notion that being aware of procedures and support is vital, firstly to reporting and secondly to accessing the support required in the aftermath of an incident. With respect to the seventeen workers mentioned, if they were unaware of procedures did they report in the correct manner? This is an important question as the statistics amount to twenty-five per cent of people who are unaware of policies and procedures and support networks in the workplace.

Furthermore, of those respondents who had been informed of procedures fourteen per cent would not know how to access professional support. Workers (twenty per cent) who knew how to access professional support had not been told of the procedures by their employers, thus suggesting that workers are expected to personally manage risk, impact and affect. This point is further supported when analysing the respondents' personal reporting networks. This finding relates to the theoretical idea of individualisation, wherein within the risk society, risk is managed at an individual level but generated on an organisational platform (Beck, 1992).

When asked about the National Taskforce on Violence against Social Care Staff (NTF) ninety-nine per cent of workers had not heard of this taskforce. The National Taskforce was put in place to build into codes of practice, legislation and local policy an

assurance that employers and workers take their responsibilities to manage risk against violence and abuse seriously. It is concerning that almost one hundred per cent of workers are unaware of this taskforce and the relevance of its existence. Does this again underline the perception that violence and abuse in practice is not taken seriously? Furthermore that the safety of workers is not paramount to employers who neglect to formally train or communicate health and safety regulations, support services and procedures? Why does this not form an integral part of a worker's induction or part of supervision? It could be argued that this relates back to large caseloads and limited time.

## **Conclusion**

There are several concluding factors to the quantitative findings and these will be developed in the discussions chapter. The findings demonstrate that workers dealing with clients who are convicted criminals are more likely to experience violence or abuse. There is a lack of understanding as to what violence and abuse constitute at work. When asked if they had been physically assaulted, seven per cent of respondents answered 'yes', however, moving onto specific examples highlighted one hundred per cent more cases. This could be related to the next point that there is potential underreporting in practice and there is a significant concern about who workers are reporting to.

Child protection workers are not using the correct procedures and equally are not reporting crimes to the police. There is a definite conscious or sub-conscious intimidation and fear factor. As part of this there is a change of approach and this is more likely in cases where the client is a convicted criminal. Where there is a change in approach, workers are avoiding home visits and contact with perpetrators. This means that violence and abuse are directly impacting on case approach, management and decision-making, which in turn leaves vulnerable families at increased risk of harm.

Gender differences can be seen acutely in relation to how males cope in practice and who males report to. Females are more likely to share negative experiences with partners, friends and colleagues, whereas their male counterparts only share these with their line managers, indicating a more pragmatic approach. Caseload as a factor needs to be explored further. A large caseload will impact on time management, heighten feelings of stress and perhaps directly affect how risk is managed within the

family which could impact the workers' personal safety. The following chapter will present the first of two qualitative data analysis chapters (Chapters Six and Seven). The quantitative results presented above, will be then be linked to the qualitative findings and further analysed with respect to theory, literature and methodology in the 'discussion' chapter (Chapter Eight).

## Chapter Six: Qualitative Data Analysis (Form, Frequency, Experience and Reporting)

*"I have on a number of occasions become aware of my vulnerability in my personal life. Professionally there are procedures and mechanisms that I can access, of late I have had to think through safety in my personal life" (Senior Practitioner, Council B).*

### Introduction

A mixed method approach was used to gather the data for this study. The previous chapter provides an account of the quantitative findings, chapters six and seven will provide an analysis of the qualitative data gathered using semi-structured interviews. The more subjective meanings to violent behaviour will be explored in order to illicit categories of understanding. The sample group was derived from the online questionnaire respondents who have experienced violence at work. In the quantitative chapter an account was presented highlighting the extent of violence and abuse in child protection. This chapter will develop those findings, examining the personal and professional impact of these experiences for workers.

The semi-structured interviews were coded using Nvivo 9 (data software package). The initial coding was developed into thematic concepts and ultimately into overarching theoretical concepts. The tertiary set of codes provided four structured sections which reflect the four key concepts of this study. The quantity of findings meant that these four sections have been split into two chapters. Secondary level 'themes' provide the narrative, explanation and content for analysis.

The chapter begins with a brief introduction illustrating the demographics of the respondents. Themes arising from the interviews which can be conceptualised under form and frequency are analysed in the next section. The second section looks at themes relating to worker experience and reporting of violence and abuse.

### Respondents

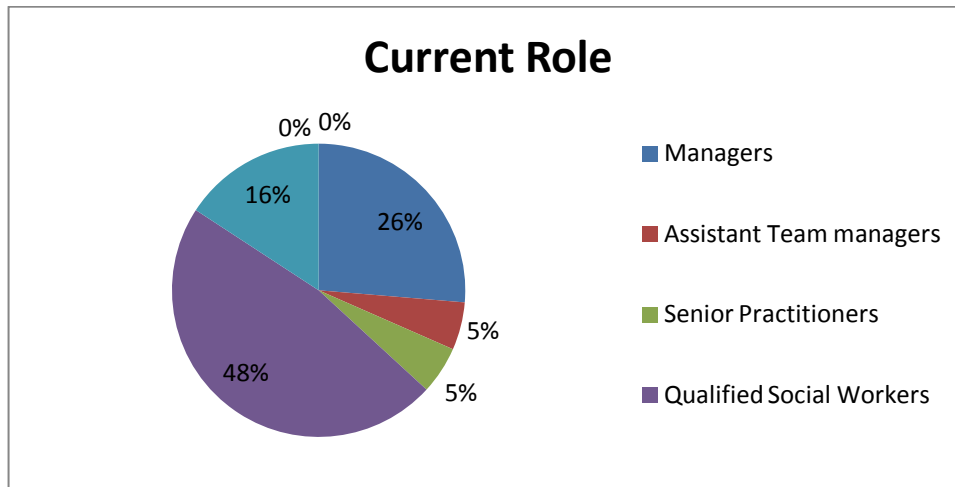
Respondents to the online questionnaire were offered the opportunity to 'opt in' to the interview process if they had experienced violence or abuse at work. It was deemed important that interviewees had experienced violence or abuse so that the qualitative data would reflect the emotional impact and effect professionally for the individual.

Possibly as a result of the parameters set for 'opting in' thirty-six per cent of questionnaire respondents opted to take part (see methodology chapter for further explanation).

The data presented in this chapter offers analysis of twenty workers' experiences of violence (nineteen females and one male). From the sample group, seventy per cent of workers were holding over the recommended caseload (page 115), and this amongst other factors meant there were six workers who were unable to take part in the study. This was due to ill health and being signed off work due to stress. One worker had collapsed in court the day before interview; these are all clear indicators of severe stress. Others who had booked an interview and put time aside were called away to court on the day or were asked to manage duty as other workers were absent. These incidents have been discussed in the methodology chapter in relation to sample group and access (page 85). However, they offer an important perspective into the chaotic nature of child protection work and the pressures workers are under on a daily basis.

As demonstrated in figure 0.3 the sample group offers a balanced representation of child protection staff. The majority of respondents were qualified workers, but each of the significant roles within child protection teams are represented (see appendix 8 – figure 0.1 and 0.2). For example twenty-six per cent of the responses are from management, whilst newly qualified workers and senior practitioners also form part of the sample group. There is a broad spectrum of experience both in the length of time workers have been practising and how long respondents have been in their current post. This emphasises the reliability and validity of the qualitative data as it makes experiences relevant to current policy, departments and practice.

Figure 0.3



Those workers who took part in the interviews all gave very candid accounts of their personal experiences of violence and abuse. Some workers were reluctant to give full descriptions of certain incidents whilst others only accounted for the 'worst' shrugging off more 'minor incidents' as not worthy of discussion. For example, "Those were the worst, the rest of them have just been the usual, I have had the odd clout and kick and stuff like that" (Interview Two, QSW, Council B). A poignant similarity in all of the interviews was the lack of emotional reaction from social workers as they described 'terrifying and horrendous' incidents. Workers described a range of personal experiences including verbal abuse, intimidation with weapons, being held hostage, bitten by dogs, threats to kill, stalking, items being thrown at them, punching, kicking, grabbing, blocking and sexual harassment. One worker described an incident when a client, "...threatened to pour petrol all over me. When I think about it now, it is quite scary and emotional. He did have a lighter and he did have petrol and he could have done it" (Interview One, QSW, Council B). This highlights the level of severity in terms of verbal threats and intimidation. It supports the decision to be inclusive of verbal abuse and underlines the curiosity as to why workers showed no emotion when recounting these events.

### Form and Frequency

This section will offer an analysis of workers' feelings and experiences of violence and abuse in practice. It will primarily focus on the form and frequency of violence as workers see and experience it. It will include the themes of violence, experience and

client response. This section will also highlight those accounts that differ from the 'norm'.

### Common Themes

#### *Verbal Abuse*

As was established in the quantitative findings, verbal intimidation and threats are the most common form of abuse. There is a broad spectrum of experience in terms of verbal abuse. Incidents span from verbal threats (face-to-face), to threats over the telephone or via email and verbal abuse involving a weapon. A common theme found with verbal abuse, which will be developed in section three of this chapter, is the apparent minimisation by workers of verbal abuse and the lack of reporting. Even though the majority of interviewees stated that these experiences were intimidating and left staff feeling frustrated and fearful, workers are still not reporting.

The majority of workers interviewed described indirect swearing and direct verbal abuse as a daily experience. Most stated that although generally it is not personally directed at the worker, 'it can be quite vicious, like threats 'I am going to stab someone', 'I am f\*\*king'... really swearing and shouting' (Interview Nine). Being verbally abused during a child protection conference, core group, court hearing or in a professional meeting was a regular occurrence according to the child protection workers who were interviewed. A worker from Council A describes the scope of verbal abuse experienced by staff:

"I don't really know where to start. I mean like I say the verbal abuse is almost daily, it is not a rare occurrence at all, I have been called names, and erm I have been called a c\*\*t in a child protection conference which is not unusual. I have had people screaming, invading my personal space and screaming in my face, people doing things like 'get out' or 'get away from them or else' and then the or else is left unsaid" (Interview Eighteen, QSW, Council A).

Workers reported feeling emotionally distressed during incidents of verbal abuse or a client venting frustrations because in most cases the children were present. This led workers to worry about what was happening in the home when they were not present and what the children might experience after they left the home visit. This suggests that impersonal verbal abuse can also lead to worker distress having an emotional impact on the worker personally.



### *Body Language*

There are physical indicators when a person is becoming agitated or aggressive and workers reported that these can often lend to them feeling intimidated or as though they need to leave an appointment. As one social worker said about her client: "he was really angry, you know, he had clenched fists, his jaw was grinding and he was pacing, all those things" (Interview Two, QSW, Council B). Body language is not only key when assessing risk throughout a visit but in some cases is used as a form of intimidation:

"Another woman actually who decided that a social work home visit to discuss court proceedings would be a good place to chop rhubarb with a large kind of big carving knife type thing. So we are having the discussion with her and she is waving the knife around and making a clear attempt to intimidate" (Interview Eighteen, QSW, Council A).

Workers reported having doors slammed on their foot or in their faces, clients physically intimidating them by 'being in their face', standing up during visits and aggressively pacing the room. In some cases workers described clients calling their family and friends in an attempt to bully social workers by using group intimidation. Some workers reported when dealing with a client's body language they would change their own and sit down to try and diffuse a potentially confrontational incident. In a minority of cases, workers would end the appointment. Workers who did not take this course of action shared feelings of pressure, feeling that they 'had to' continue a visit until they had defused the situation and completed their assessment or seen the child alone, thereby putting themselves at potential risk of harm.

### *Threats*

Child protection workers undertake assessments that can lead to children being removed from their families. This was the main reason given by interviewees as to why they felt they had received threats from clients. This was also in several cases used to minimise and 'excuse' clients for making serious threats towards workers. It became apparent that as well as excusing a client's behaviour these threats were not being taken seriously in practice and there appeared to be no action taken by the agency in response to this. These incidents were emotionally affecting workers and a lack of response only heightened the emotional response from staff. The threats varied in content and severity. These threats varied from very real and frightening verbal threats

as this worker from Council A describes:

“I have had people who have been rude to me over the phone, threatening to kill me over the phone even though they had never met me” (Interview Nineteen, QSW, Council A).

Threats then escalated to the physical act of stalking. Workers felt that stalking and clients who held criminal records ‘proved’ that clients were therefore capable of violence and didn’t care, and as a result staff found these individuals more fear-provoking:

“I received death threats, I received threatening messages on my mobile phone, threatening text messages, they followed me in my car to my house, they followed the foster carers back to where they were living with the children, they threatened to fire bomb all the local authority buildings and my house and that was really horrible and scary and they kept getting arrested for violent things to each other, between the family and the boyfriends etc. So you knew they would do ridiculous things and not care if they got caught” (Interview Five, QSW, Council B).

Staff were concerned for their family and friends due to the level, severity and plausibility of the threats made:

“Then mum wrote to me and wished me and my family dead and stuff. The threats wasn’t very nice, if she had wished me dead I wouldn’t have thought anything about it but it was you and your family so...” (Interview Four, Manager, Council B).

“She was extremely angry, she wrote like a two or three page A4 page email to me [and] my supervisor and she said she had copied in a solicitor and it just basically said I don’t know how you sleep at night you are ridiculously bad at your job. She did say to a health visitor if I was to go near her house ‘she would smash my face in’ and to be told that kind of thing...” (Interview Three, NQSW, Council A).

These examples demonstrate that individuals do not have to be a victim of actual physical violence to be affected by violence and abuse. The use of a weapon, a threat to a worker and their family, and the concern of a professional complaint can all have an emotional impact. This chapter will discuss later how this affects a worker’s approach to a case and how the risk to the worker is managed where threats have been made. Workers described feeling nervous, not sleeping, and feeling ‘shaky’, anxious and distressed as a result of being threatened by a client, whether they took the threat seriously or not; receiving a threat was enough to evoke fear.

### *Acknowledgment*

Workers discussed the acknowledgment of verbal abuse in practice. Due to the 'varying levels' of abuse described by many interviewees, there is an apparent reluctance to acknowledge implied intimidation and threatening undertones from clients in practice.

"There is frequent intimidation rather than overt threats of violence but it is there you can sense it and people imply it by their behaviour" (Interview Eighteen, QSW, Council A).

According to interviewees, the level of indirect intimidation varies and affects the degree to which this type of abuse is acknowledged. Workers found intimidation and verbal abuse was in some cases very frightening, reporting that they felt fearful:

"I mean there are varying levels. There is that which is actually very frightening and very very real and very... very clear they are being violent and threatening and I feel at risk but then there are the other levels that actually the social workers find very hard to explain, where they are feeling very uncomfortable" (Interview Six, Manager, Council B).

Staff expanded on this point stating, that it is not always the direct threat that leaves workers feeling uncomfortable and fearful but the indirect verbal abuse and threats. This is difficult to explain and in turn report as the following quote demonstrates:

"We were chatting and I can't remember about what and then he mentioned he had a gun and it wasn't a direct threat but there was that feeling that I was picking up that he was saying, just remember, I have a gun you know, that undertone. So it is maybe not always the direct threats" (Interview Thirteen, QSW, Council B).

If these incidents are not recognised and furthermore not acknowledged by the worker or by managers during supervision, this could mean that risk is not being assessed effectively. In some cases workers reported that verbal abuse was 'excused' because of a client's mental health disorder, being under the influence of drugs or alcohol or that the worker took responsibility for the client becoming verbally aggressive. Research demonstrates that verbal abuse and threats usually predict actual physical violence (Lupton and Gillespie, 1994). A lack of acknowledgment both in literature and practice is concerning. If verbal abuse, 'feeling uncomfortable' and intimidation are identified in practice this could lead to a more evidenced risk assessment, better management of risk to the worker and in turn a less fearful workforce.

### *Physical Violence*

The majority of workers either gave accounts of colleagues who had been physically attacked or personal experiences of physical violence. Having said this, all workers believed actual physical violence to be 'less likely' than verbal.

It appears that there are two kinds of violence. The first is that of actual physical violence, for example punching, kicking, slapping and stabbing, i.e. acts where the worker is left with a physical injury. Then there are acts of violence where the worker is not physically harmed but has been physically blocked, held hostage, stalked or harassed.

Workers reported incidents where they had been cut, bitten, punched, slapped, assaulted with a knife, 'walloped', attacked and had household items thrown at them. One worker describes an incident where she was bitten by a dog:

"The front door opened I was literally stood on the door step and the dog just ran literally out of the house it got me on my stomach. I still have a rather large scar, it took a chunk out of my stomach – it was a large dog and his head was at the height of my stomach, it literally just bit me" (Interview Two, QSW, Council B).

Several workers mentioned the use of family pets as a weapon used to intimidate workers and in some cases attack workers. One worker stated that she had never visited a home where they had a 'nice poodle' but rather that the dogs are trained to 'fight and attack'. This particular worker always requests that dogs be put in another room as part of her risk assessment, she claimed that in some cases families refused to do this.

Interviewees noted that all acts of physical attack related to the content and intention of the visit. One worker reported being punched whilst trying to remove children:

"I have been hit once and that was when I went to remove some children and the children's uncle punched me. He punched me and I had the option obviously to press charges but I thought well I didn't because I thought what is the point, what will it achieve. It was a difficult situation" (Interview Five, QSW, Council B).

In these instances, workers knew that they were approaching families to remove children. In most interviews this was seen as an event that heightened risk to the

worker. Indeed, the majority of violent incidents occurred with a family who were involved in court proceedings and on the Child Protection register, or whilst children were being removed. This will be considered later when examining ways to develop risk assessment. Also of note is the fact that none of the incidents of violence or abuse during the interviews were reported to the Police. In the statement above, the social worker states that there is no point in reporting. This is not an uncommon response, and it underscores a trend that workers do not appropriately acknowledge violence and abuse. Many are overly empathetic to the client's situation, which leads to ineffective management of violent incidents. While incidents of violence with a weapon were disclosed by several practitioners, none were injured as a result of their experience. In all cases workers talked about extreme psychological distress as a result of the incident. One worker describes how a young person 'totally lost it', picked up a knife and started to threaten her with it:

"He was actually slashing at the desk and slashing at me – at this point I was actually climbing up the desk and up the wall while he was trying to cut me with the knife. So that is probably the most scary thing that has happened, as I could see he had totally lost it he didn't know what he was doing anymore" (Interview Two, QSW, Council B).

Another worker tells of a current problem for a colleague at the council and how this is affecting all social workers based in that location:

"Well she is seven months pregnant at the minute and someone threatened to stab her and so we had to have everyone leaving the building at the same time, she had to be accompanied to her car, they said you know he is a real threat, he has mental health issues and that's quite horrible for her" (Interview Five, QSW, Council B).

Some workers report that they have had several experiences of threatening, intimidating and violent behaviour. A worker from Council B describes her encounters, which spilled into her personal life:

"I would be verbally abused if I was in Sainsbury's from parents of a child that I worked with who was actually adopted and it was horrendous and sort of knocking at my door at two o'clock [am] and it was hell, absolutely hell. Then being followed home from a contact and having to try and make a getaway. Being trapped in a house in a bedroom for hours where we had to barricade ourselves in because the father wanted to kill us" (Interview Fifteen, QSW, Council B).

Other reports related to workers being physically trapped, intimidated, stalked or harassed. A high proportion of workers reported events such as these, some reporting that this was happening to them in their personal life as well as when they were at work. Interview Five describes how violence and abuse in the workplace affected them in their personal life:

“It was the fear from other family members, being followed in your car and things like that. I could see them they weren’t very clever about the way they were doing it at all. I had to put a cover over my car every night so they couldn’t tell for sure exactly where I lived, the effect that had on me actually, about them knowing where I lived, was every time I heard a noise in the street or a car passing I would get up and check” (Interview Five, QSW, Council B).

“Just different stalking but that is outside of work, outside the council offices here, that’s cos I am in and out all the time, wherever you work you get that” (Interview One, QSW, Council B).

Some workers mentioned being abused in their local supermarket or being followed in their cars when leaving work or contact visits. On these occasions workers were advised to drive around roundabouts twice to ensure they were not being tailed. They were offered no other support relating to the issue and were not encouraged or told to report these incidents to the Police. In one interview the worker described being ‘barged off the road’ by an angry parent in the car behind her.

Being held hostage by a client was another common theme. Described by some as being locked in or denied exit from a property, others gave accounts of being held for hours against their will. One worker was taken hostage by a client who was wielding a crowbar as a threat and not allowing her to leave. When phoning in for help, the worker used the code word and the manager at the time did not respond to the code word as ‘she was unaware of the code’. The code words are in place to alert staff in the office that a worker is in danger. Codes are used where workers do not want the client to know that they are calling for help. Another worker described being put at risk by fellow colleagues who turned up unannounced to remove children during one of her visits:

“It took a good two hours for the police to come and we were stuck in this room and the children were terrified. In fact when the police did come, which was as I say two hours later, they had to line the stairs both sides and the bottom of the hallway to protect us from him [the father]. It was terrifying, I honestly didn’t think I would come out. And again why did it take two hours for the police to come, why was this not planned, you put workers at huge risk by telling this family they were going to take their children, nobody knew this was going to be done, the manager didn’t

ring us to see if we were OK and there we were absolutely terrified for the lives of these kids and our own” (Interview Fifteen, QSW, Council B).

Another worker describes how the Lone Working Policy and colleagues who were unaware of procedures put staff at risk:

“One of my colleagues was trapped in a bedroom by a teenager at knifepoint for three hours and no one in her team noticed she was missing cos it was last thing in the day and no one noticed she was missing. I don’t know what she was doing with her mobile phone at the time whether, he had said ‘don’t get your phones out’ or whatever but she was off for a month after with stress” (Interview Five, QSW, Council B).

In these cases there were policies in place that were designed to protect workers; however, these failed during the above incidents. Lone Working Policies implement the use of mobile phones and code words. However, insights gathered during these interviews suggest that lone working policies are ineffective in their current state if the worker is held hostage or physically attacked. In incidents such as these how can a worker use their mobile phone? Questions might also be asked about how comprehensively such policies are implemented and adhered to. For example, how did it come to be that a manager was not aware of an emergency code word?

During the interview process, three incidents of sexual harassment were reported by female workers. One worker was pinned down by a male teenager, who reportedly told her that he ‘fancied her’ and that ‘he could do what he wanted to her’. The worker reports, “I was thinking he would take my top off and could do anything like sexual” (Interview One, QSW, Council B). When asked why she didn’t use her mobile she said ‘he had my arms pinned down, I couldn’t get to my mobile and there was no one around so I couldn’t scream’. She stated that next time she would make sure they met in a public place. The other cases of harassment were verbal, where clients had ‘come on to’ workers or used this to intimidate female staff.

### **Experience and Reporting**

Workers expressed dismay with the reality of their work with families, often stating ‘this isn’t what I signed up for’ and ‘I wanted to be a social worker to help people, not to be abused’. The negative connotations associated with social work and indeed with social workers were highlighted on several occasions. Some workers suggested that this

image could act as a potential trigger for violence and abuse. The findings from the interviews reflected an organisational culture that accepted violence, abuse, large caseloads, stress and anxiety as the norm and this was accepted by every interviewee.

This section analyses these points, further drawing on the themes of worker backgrounds, organisational culture, feelings and impact, and finally reporting and support. This aims to provide an overview of experience and reporting in practice.

### Common Themes

#### *Background*

When asked about experiences and impact workers often discussed their personal background and career as a factor that enhanced their ability to 'cope' in practice. Many workers stated that previous placements meant that they felt better equipped to deal with violent or abusive episodes. These workers commented that 'having a good placement helped you learn the skills you need for a career in social work'.

Later, when developing this area of interest, participants stated that having an effective skill set was based on 'luck'. A large proportion of workers spoke about 'luck' relating their skill set to 'being lucky and being placed in a good team' or transversely they were simply 'lucky' because they had never been attacked. This idea of luck is an original concept which will be further developed in the discussions chapter. Of concern was the vast number of workers who disclosed that they learnt 'through making mistakes'. When discussing how workers build 'skills' one worker stated that, a mixture of 'luck and mistakes' have provided her with an experienced skill set:

"Partly experience, which is based on luck, you hope the mistakes you make are small and that the lessons you learn you learn well enough, which is really scary. I was really lucky, I had two really good placements. I was very lucky, I had these early in my career, so I feel very confident" (Interview Two, QSW, Council B).

Some workers went into detail about their personal life and how events in their past had helped shape them into a resilient social worker. For several workers child protection was not their first career: one worker had previously delivered milk for a living, others had studied later in life after having children and therefore attributed their 'skills' to life experience.



“I don’t think you get prepared to do that and there is no training in place to help you deal with it so there is almost an expectation that just within yourself you find those skills or the way to manage” (Interview Ten, QSW, Council A).

It becomes apparent when analysing the interview data that there is a belief that workers have to hold an innate set of skills to be an effective social worker. Many suggested that with the right skills, staff are less likely to be attacked or abused at work. Others commented that a good skill set means the impact of such incidents is handled in a ‘better way’, stating workers are more likely to ‘bounce back’.

When discussing this topic with managers they often reported that ‘you had to be a certain type of person to be in this job’. This is a point that will be analysed further when discussing organisational culture. One manager characterised this as:

“I think because of the nature of the work you are going to find some people who are perhaps more predisposed to incidents happening to them. Again, that might be a personality thing, a person not being particularly conscious of how they come across, and then you will have others that you know they wouldn’t necessarily be able to recognise it because by wearing the hat of social care they actually feel that they are a punching bag” (Interview Fourteen, Manager, Council B).

Social workers all spoke about the set of skills that are required to deal with day-to-day social work, but also to deal with the personal impact of the job. Many workers discussed the ‘fact’ that this job is not for everyone:

“A lot of people say ‘oh I couldn’t do your job’ and I think, no this job isn’t for everyone, and I have seen people, and I haven’t even been here a year, and I have seen someone who started after me and has already left just because it isn’t for everyone” (Interview Three, NQSW, Council A).

Resilience was a word that was repeated in every interview, as all interviewees a concept of the ‘resilient worker’. Many workers attributed resilience to life experiences and personal background. When asked if this ‘skill set’ and ‘resilience’ could be learnt, workers commented that it could be learnt but that in the majority of cases this was developed through being in ‘good’ teams (which suggests that there are bad teams). Workers also noted that to learn this would mean that there was training but in reality training on how to deal with violence and abuse or difficult families did not exist. Workers stated therefore that they learnt through their own mistakes and good

placements.

### *Culture*

Organisational culture presented as a key theme throughout the interview process. Every worker mentioned the social work culture in some form. It appeared that the culture and image of social work affected many areas of practice. The broad spectrum of effects included from the acceptance of violence and abuse to actually being named as a trigger for violent incidents. The general consensus amongst workers was that: "it is accepted that within social work you take a certain level of abuse and aggression from people. That is just what you do" (Interview Eight, NQSW, Council A). Many workers believed that the negative portrayal of workers in the media led to workers being verbally abused and in some cases allowed clients to believe that 'it was ok to disrespect a social worker'. This statement was repeated on several occasions and some workers compared their role to that of a doctor, nurse or teacher and commented that these professionals are treated with greater respect than social workers.

Workers felt that in social work organisations there were no 'rules or consequences' set around violent or abusive clients. This refers back to organisational responsibility. It would appear as with the ideology of 'the risk society' (Beck, 1992) that social work agencies are expecting the individual to manage the incidents in isolation and as a result workers experience isolation and individualisation. The majority of workers felt that 'clients got away with being abusive' and in some cases workers felt that the system 'sided with the client' and the 'client got what they wanted by being abusive'. Thus in many cases the client did 'not learn a lesson' and there was no consequence for their actions, thus they were more likely to continue to behave aggressively:

"We don't really discuss it, we just accept that it happens. It is accepted as part of the job so you feel if you talk about it, it won't change 'cos it is the culture of the way people treat social workers in this country and it's our culture to just accept it. So yeah, I think it is just the culture and it is not going to change" (Interview Five, QSW, Council B).

There were workers that challenged the notion that violence and abuse is accepted stating that they felt it was to be expected but personally would not accept it. One worker stated that it is 'dependent on your manager':

"I guess it depends who your manager is, I am very fortunate that my manager is very good. Probably the best manager in the safeguarding team but I still don't feel that there is a clear

message about the abuse, that it is just accepted” (Interview Seven, Senior Practitioner, Council B).

As part of the ‘culture’, support networks seemed to be vital in managing the impact of violence and abuse and in dealing appropriately with incidents. As is demonstrated above, a supportive manager who did not accept or tolerate violence led to a culture of reporting and resilience. In many interviews the idea of team spirit was mentioned as a ‘coping mechanism’. Where this was not the case for other workers they described working environments as stressful and anxious, where workers were questioned about their ability rather than supported. For example a worker from Council A illustrates:

“To a degree it is almost bit of joke when someone shouts and swears at you or you just don’t really take it seriously. And where there is a near miss, where we have had a couple, again it is almost seen as a bit of a joke, rather than actually what could we have done differently that would have prevented that near miss from happening to begin with. It is just part of the job” (Interview Eighteen, QSW, Council A).

Violence and abuse were also described as normalised and tolerated by workers, managers and the organisation. Managers and the organisation not taking abusive incidents seriously led to workers feeling that these issues were being normalised and tolerated. Workers also highlighted that by being empathetic with clients and understanding worker effect in the client/worker relationship, meant that they too were normalising abuse:

“I definitely think there is a sense of - what do you call it when you get used to something? Normalised. You do I think, but equally when you talk about cases, not that you become, I think in a way you become less risk adverse but also you become, you lose some of the emotion from it if you do it. If I ever speak to friends and family and do a case example their reaction is so far removed from mine” (Interview Eleven, Assistant Team Manager, Council B).

Workers talked about organisations setting precedence and publicising that violence and abuse would not be accepted. Workers felt that in turn this would prove both to staff and to clients that violence and abuse would not be tolerated. “I think it might be helpful especially with [child protection] conferences that it is said before you even go into a [child protection] conference that things like that won’t be tolerated ‘cos I think that is quite common” (Interview Sixteen, QSW, Council A). Workers felt that presently councils were not sending this message and as a result gave the impression that this was tolerated. This was the case in both local authorities taking part in the study.

### *Feelings and Impact*

Feelings affected the workers' experience in practice and in the reporting of incidents. There were numerous negative feelings in relation to threats, verbal abuse and violence. This supports the original hypothesis that violence and abuse impact the worker negatively. "I guess the fear is always there, you do always feel anxious" (Interview Two, QSW, Council B). Workers described feelings of anxiety, embarrassment, distress, fright and hurt. "I felt embarrassed that I had got myself into that situation. It can be a bit scary" (Interview One, QSW, Council B). Incidents left workers feeling frustrated, demoralised, guilty, tired, nervous and outraged. In some cases workers were left in tears, pumped with adrenaline, sensitive and 'soul destroyed' by violent and abusive incidents. One worker who would describe herself as resilient reported how she felt in response to experiencing violence and abuse at work:

"It was upsetting and there was one a couple of times, and I live with my girls, with my friends and when I went home and I was actually upset about it, like actually crying about it, just because you go into work and you try and support people and that is what you get back" (Interview Three, NQSW, Council A).

Another worker described how even historical incidents can still have a personal and emotional impact:

"Many years ago when I was a practising social worker I was thumped, I was held up against the wall and threatened by a sword, so they were very tangible, very real and very frightening experiences" (Interview Six, Manager, Council B).

These accounts clearly demonstrate that the feelings caused by incidents at work have a personal impact and this often spills into life outside of work. One worker describes how she has had two breakdowns as a combination of abuse and lack of support at work:

"...they were a lot to do with lack of supervision I think, 'cos you take a case on, it finishes and what do you do with that. I have been around thirty odd years, people have told me some horrendous things, unbelievable things of the abuse they have suffered in whatever form and I have had to hold onto that, how do you let go of that? I have suppressed it" (Interview Nineteen, QSW, Council A).

In other scenarios, workers state how supported they are by management and in

supervision but in the next breath they also state that they don't honestly 'open up'. For example:

"I felt quite supported and was able to talk about it. I haven't ever talked about how I felt leaving the building or going back to my car though. That is quite interesting" (Interview Seventeen, NQSW, Council A).

Here the worker reflects that in reality she is not being completely honest with her manager, which further raises the question of managing feelings in response to violence and abuse. The difficulty with managing emotions and impact is that every worker is an individual. There are, however, basic things that should happen, as noted here by Interviewee Two;

"There are a few things that, even though it is difficult, need to happen, and that is not judging, and there is quite a lot of judging. I mean I know through a colleague who went through all of that, everyone was very nice but behind her back was like 'why don't they bloody come back to work'. There is that kind of 'are you tough enough'? There is always a question about whether you should be a social worker" (Interview Two, QSW, Council B).

As research suggests (Community Care, 2009) there is a degree of burnout amongst workers, which was openly discussed in the interviews. Participants described stress and anxiety as two factors which lead to them feeling worn out and exhausted. They describe an overwhelming feeling of being unable to cope. In some cases this is caused by large caseloads, with workers stating that then when verbally abused, threatened or attacked this 'pushes you over the edge'. One worker below reports that all these symptoms can cause a lack of sleep and 'so you are stuck in this perpetual cycle'.

"I find removing myself and going away probably the most difficult. I can, there have been nights where I have, it has improved now but there has been nights where I have not slept at all and it is horrendous, you close your eyes and they ping open, the more you worry the worse it gets. Which again is another hazard to us cos you only get so much time before you burn out" (Interview Fifteen, QSW, Council B).

Workers state that to combat these feelings they take annual leave or in some cases they are signed off sick by their GP. Most workers when discussing annual leave also note that generally this leave is either cancelled due to workload or they take work with them. Support will be analysed later in this section, however when workers discuss the

impact of incidents personally, they note that they are not encouraged by managers or supervisors to take TOIL (Time Owed in Lieu), annual leave or to simply have a lunch break. Workers reported that this had a damaging effect on them personally and in their personal lives. One worker stated that they had been divorced twice and they saw this as a result of the job. Many workers supported this, saying they had lost friends and found it difficult to have 'a life outside work'.

One worker discussed how she became the aggressor at home due to the aggression she had suffered during the day at work: "there is no doubt what you see and feel during your day goes with you to home, 'cos I know that some of what I have been through, I act out then at home" (Interview Sixteen, QSW, Council A).

Mental health was discussed by participants, as they felt the job impacted on their mental wellbeing. This was attributed to the chemical effect of stress on the brain in one case, while other workers spoke more bluntly about 'their sanity' and trying to stay sane. "I mean I do, I get completely stressed out, I have trouble sleeping, I have to work hard when I am doing CP work at staying sane" (Interview Two, QSW, Council B). Other workers described how fear can lead to feeling paranoid even when in their home town:

"It affects you when you're out and about, what you say to people. I live here and in some cases I have taken children away or helped take them away so you know my life is sort of like always, just be careful what you're doing, they could think 'oh that's her there', I am a bit paranoid really" (Interview One, QSW, Council B).

From these accounts there is a recognisable emotional impact for workers both personally and professionally. This is an area for consideration when looking at the management and support of workers in practice. If workers are feeling emotionally drained, fearful or stressed, then as has been highlighted this will directly impact their service delivery.

### *Reporting and Support*

Workers report that they do not feel protected in practice, stating that they were often offered no support after their personal experiences of violence. It was also highlighted that when expressing concerns about risk to workers they were provided no support prior to a risky home visit. The majority of workers supported the claims that they would

not report verbal abuse and only reported physical violence to their managers. Most workers were unaware of the correct procedures for reporting. One worker was told to report being punched in the face in the office incident book where workers report incidents such as spilling hot water, for example. This would give the impression that being physically attacked is equal to a slip or trip in the office and is not taken seriously by the organisation. A worker in Council B states:

“I was discouraged from reporting it to the Police because it would have been a problem. I don’t think procedures are good enough, I don’t think they are formal enough or robust enough and clear enough really” (Interview Five, QSW, Council B).

There was also a sense that the attitudes of managers and colleagues played a key part in reporting and honestly expressing feelings. Workers felt that they were judged if they expressed upset, or disclosed that they couldn’t cope. Workers described a ‘macho culture’ where staff are expected to just get on with the job and not have feelings:

“The emotional impact is huge. You do have to be careful, I did cry once when I was feeling ill, it wasn’t because I had a bad day I was just run down and again you get that ‘oooo are you alright?’” (Interview Two, QSW, Council B).

This level of scrutiny and judgement led workers to feel as though they were ‘confessing’ or ‘admitting failure’ in supervision when discussing how they felt or reporting certain incidents of abuse. Workers stated that if they reported a violent incident, they were often teased by colleagues or managers for being a ‘wuss’, ‘incapable’ or ‘pathetic’. Workers are often held accountable for the violent or abusive situation and are questioned as to what they did to cause the situation. This undermines worker integrity and confidence.

With respect to this, workers reflected that social work itself is reactive and operates chaotically, much like its client base:

“It is very chaotic with lots of laughter or hysteria. It would be nice to get to that place where people are calmer and rational and more supported. You can sit and watch it happen, the social workers’ stress moves up to the management and then goes up the next level and you can see it all the way up and then they are very chaotic responses rather than rational” (Interview Two, QSW, Council B).

Informal support networks were discussed as being vital to 'surviving' in social work. Individually, workers had set up buddy systems, which they described as invaluable. Where managers did not check their whereabouts or safety, their colleagues would. Team spirit was also frequently mentioned not only as a support network used as a coping strategy, but also as a means of assessing risk. It was reported that in a supportive team, colleagues were more open to attending potentially risky home visits as a pair:

"I think as a team, it is a small team, it is a supportive team and we can talk about how we are feeling and work out strategies for ourselves and I think what we tend to do is support each other with evening visits so if you have people doing evening visits we will always call each other at the end of the day to make sure the last person out is fine and if it was a difficult visit that they are OK" (Interview Fifteen, QSW, Council B).

Many workers disclosed using this more effectively than supervision. Views on supervision varied in response from workers. The majority of workers found this a useful tool to discuss and reflect on cases but workers wanted more time to 'offload' and talk about personal feelings. In some cases workers were not receiving regular supervision and in others workers were only allowed time to cover case management during supervision. The difference in impact and feelings when dealing with a violent or abusive situation were reflected by the difference between supervision and support. Where workers felt supported by management, a sense of belonging, and team camaraderie, they were more likely to report the incident and employ more effective coping strategies. Poor supervision had the opposite effect and saw workers having sleepless nights, being signed off sick and struggling to manage cases. Manager's views were very different to those of their workers. Managers gave examples of how they would support staff in the aftermath of a violent or abusive incident. Interview Five talks about the supervision received after being punched:

"I didn't have any supervision over that period of time. When we get really busy I've heard my manager say it to me before, it is where she says 'you look so stressed that I don't want to demand that I give you supervision 'cos I don't want to make it worse'" (Interview Five, QSW, Council B).

A worker from Council A states that although she has had supervision there is not sufficient time:



“Supervision is usually for case management. You will have an hour and a half supervision every three weeks and there is not really sufficient time within that to talk about anything other than case management, what is happening and where it is going to go” (Interview Eighteen, QSW, Council A).

When asked what support workers were offered in the aftermath of incidents most responded in the same way as Interview Fifteen: “no increased supervision. None. None. I actually don’t think I was supported at all” (Interview Fifteen, QSW, Council B). In one case the worker stated that she was offered supervision afterwards but was then questioned as to how she might have caused the situation, leaving her feeling incompetent. A manager discussing support offered in supervision observes the following:

“...lack of time and pressure and if it is really significant and the abuse, the verbal abuse, if it is physical obviously that will be dealt with absolutely, but if the verbal abuse is really full on then it is making sure that is recorded but I don’t think that even is... the verbal we don’t, we don’t put the verbal stuff on. Management know it happens and at the top they know it happens but if it is not written down it has not happened...” (Interview Eleven, Assistant Team Manager, Council B).

## **Conclusion**

The findings demonstrate that violence and abuse are much accepted as part of the job by staff, management and the organisation. Subsequently, the experience and thus the effects of violence and abuse are often minimised and normalised by workers. The perception of social work, social work culture and media messages were all identified as reasons why social workers are treated with a lack of respect. Social work culture was given as an explanation as to why workers accepted violence and abuse.

Interview data found that there are certain tasks that often carry greater risks, for example, workers removing children, sharing child protection reports with families and attending court. Many workers found that the system itself is abusive and can cause frustrations, for example, delivering manager’s decisions or restrictive child protection plans. As a result of these findings perhaps there is an argument that risk assessments should be based on the task that the social worker is carrying out. For example, if it is a family that the worker is comfortable with, but they are going to deliver bad news, then

the risk increases. Procedures and policies are in place but how can they be made more flexible to individual scenarios?

The majority of workers stated that they would not report verbal abuse and in many cases did not report physical abuse either. Where incidents were reported workers did this in supervision rather than follow correct procedures and fill out incident forms. As workers were not reporting these incidents, hazards were not raised and risk assessment forms were not updated. Reportedly verbal abuse is not 'flagged up on risk assessments'. Violence and abuse is not taken seriously and it is normalised and seen in some cases 'as a bit of a joke'. Interviewee attitudes toward the reporting system reinforce the fact that violence and abuse are accepted.

This chapter has reviewed the form, frequency, experience and reporting of violence as found in the semi-structured interviews. The study now moves on to describe the impact of management, policy and procedure on the abused child protection worker.

## Chapter Seven: Qualitative Data Analysis (Management, Policy and Procedure)

*"Yesterday someone threatened to pour petrol all over me" (QSW, Council A).*

### Introduction

This chapter follows on from the previous qualitative data analysis chapter with a focus on effect, management, policy and procedure. Effects of violence and abuse on professional practice and case management will be discussed. The chapter will present the findings of the professional effects reported by workers. A description of findings with respect to management and support will be illustrated. Finally, thoughts and feelings of workers relating to current policy and procedure, and what these would look like in an ideal world are examined.

### Affect and Management

Workers reluctantly reported that violence and abuse did have an effect on case management, decision-making and relationships with clients. Some workers described supervision as ineffective whilst others 'barely' received supervision at all.

The following provides a descriptive account of the themes drawn from the data set. Affect, agency response, approach to case and time management will all be presented in the following section.

### Common Themes

#### *Affect*

Respondents commented that the affect of violence and abuse was twofold, stating that it has a personal and professional affect. The personal impact can be paranoia, anxiety and worry. In practice, affects include avoidance of clients, having no time to reflect, making biased decisions and poor case management. In some cases the worker was 'taken off a case'. As one worker explained:

"If I heard an alarm going off or shouting I would be at the window really paranoid, looking out the window. What we had to do was we had to move out of the bedroom and move to the bedroom on the other side of the house because I was not sleeping. Any noise and I was up and I was like 'Oh my God what the hell is that?' So yeah that was the big change, so it has

affected my life them doing that. I live with my husband so it affects him as well” (Interview Five, QSW, Council B).

Another worker described how their personal experience of violence abuse left them feeling reluctant to visit the client again:

“... [you think] ‘that was scary’ and it impacts on your work ‘cos you do then think whether you like it or not, you do then think the next time that happens I don’t really wanna go there” (Interview Seventeen, NQSW, Council A).

Experienced workers, who would describe themselves as confident, noted that when it comes to abuse and lone working the two in combination can ‘make you realise how vulnerable you are’. Several workers noted that this affected them when walking around the town at lunchtimes, leaving houses, visiting homes or leaving the office. Some workers lived in the same local area that they worked in and for those workers the violence and abuse experienced spilled into their personal lives and homes:

“It affects me the same, I am quite confident so I think I could take anyone on then you realise how vulnerable you are, if I am not sort of on my guard all the time, watching over yourself” (Interview One, QSW, Council B).

Workers stated that whilst every effort was made not to let violence and abuse affect decisions and case management, in the majority of cases it did:

“My manager said ‘have you involved the dad at all during the process?’ and I hadn’t made any effort to contact him so she said ‘you need to make an effort to contact him’ so I suppose she was pointing out to me that I could be avoiding him ‘cos he was abusive” (Interview Sixteen, QSW, Council B).

Workers who felt supported by management all reported that supervision is a useful tool in those situations where a worker is affected. Staff found violence and abuse toward a worker difficult to manage or rationalise because if as a worker they felt frightened, then they questioned how a child could be left living in the household of a perpetrator.

When discussing decision-making, many workers felt that the violence and abuse they had experienced did in some way affect their decision-making. In some cases, workers stated that they would try not to let a client’s actions affect their decision-making but

also reported that a client's mistreatment of a worker would make them question the perpetrator's role as a parent:

"Yeah cos I think when things like that happen it sort of evokes an emotional response in you doesn't it? So you are not as objective as you might be with other cases and decisions, so yeah I definitely think so [it affects decision making]" (Interview Eight, NQSW, Council A).

A worker describes below how they find it difficult to manage their emotional response and how this could be a problem for child protection staff:

"I think where you have got a violent or aggressive family you have to be very, very, very careful that you don't make different decisions than you would with a family that are much easier and more able to control, and I think historically there probably have been cases where they are very difficult and very verbally abusive have been given different treatment" (Interview Six, Manager, Council B).

Interview Seven suggests that when trying to be balanced about working with someone with a history of violence, workers can sometimes overcompensate for this in reports. The worker states that this is 'being balanced' but it is questionable as to whether the worker is actually just applying the 'rule of optimism':

"Say a father for example who you know to be violent, what it does is you end up having a very negative relationship with that particular person and it also makes you very wary, even if you follow that through. It means that everything you write has to be further balanced because you know that on one hand you have a very negative relationship with that person and you are trying to be as balanced as you possibly can when you are doing your written work" (Interview Seven, Senior Practitioner, Council B).

In other cases workers talked about 'holding back' either from delivering bad news or from challenging the client on difficult issues. Thus interview data found that violence and abuse directly affected the approach to a case. This trend emerged from the majority of the interviews:

"I think if I have to go and say something, and if they are completely kicking off about something else, I would hold back and either not do it. It definitely holds it up I think, 'cos you have to go and maybe wait for them to calm down, or wait until you have more information, or wait 'til you have someone else to come with you. Yeah it definitely affects it" (Interview Seventeen, NQSW, Council A).

Therefore, with respect to decision-making, if a worker claims that they 'hold back' when approaching clients what does this mean in terms of making decisions? Fewer workers admitted that violence or abuse would ultimately affect their decisions, however, if workers are fearful of delivering bad or challenging news then would they make more 'agreeable' decisions or write overly optimistic reports so as not to 'upset' or 'antagonise' a potentially violent client? It could be argued that decision-making and approach are managed in supervision, but what about those workers whose supervision is ineffective or non-existent? Many workers reported feeling unable to be truly open and honest about their personal feelings with supervisors, therefore this issue may not be being managed in practice.

Workers who felt that their decision-making and approach to cases were affected by a violent or abusive perpetrator also stated that their caseload suffered as a result: "Your work suffers, so you go to your last home visit after a couple of visits and think did I do that as well as I could have done?" (Interview Two, QSW, Council B). One manager commented that all workers have too many cases, they are overworked and as a consequence when workers suffer abuse the 'customers or service users do not get the best service as they could if social services were better resourced' (Interview Four).

"It was really stressful, I couldn't do anything right, my other cases suffered 'cos of it. I think you sort of go home thinking about it and it is exhausting" (Interview Eight, NQSW, Council A).

As with the quantitative data, findings from the interviews reflected that workers were more likely to experience feelings of anxiety and fear as a result of working with convicted criminals. This was also a contributory factor in those examples where workers admitted a change in approach or decision-making due to violence and abuse. Workers stated that in some cases these clients had committed 'horrendous crimes against other people' and 'did not care that they had been in prison'. Therefore workers felt these clients were predisposed to such behaviours and lacked the empathy or understanding for their victims and indeed workers. "I think that the main people I am concerned of are the people that I know have got a track record of not caring about prison or caring about the police and going from zero to 20 in ten seconds for no reason. They are the people that concern me the most" (Interview Five, QSW, Council B).

### *Agency Response*

Interview data showed that workers felt disgruntled and 'let down' by the response of their respective agencies to violent and abusive incidents. Many workers spoke of an 'ideal' and this will be analysed further with regard to policy and procedure. For now, the analysis will focus on the agencies' responses to incidents of violence and abuse, from the point of view of the child protection workers. One interviewee said:

"I don't think it should just be accepted, 'oh it is OK it is just because you are doing CP work'. Yeah we are but you know what, we don't have to accept it. Because would any other Joe Bloggs in the High Street accept it? Does it mean we are lesser people? Are we worth next to useless? I think they [the agency] should have made it clearer and actually maybe taken them [client/perpetrator] to court and said 'you know this is what you are doing, you are not going to do it, and this is what we are going to do about it'. It is absolutely miserable... I think there has got to be more consequences, we need to be firmer and that is my honest opinion. I think we pussy foot around too much and we allow parents to exhibit unreasonable and unacceptable behaviour" (Interview Fifteen, QSW, Council B).

Interview Three describes a similar view, only in this case the agency's response meant that the client's behaviour did as was intended and hampered the progress of the case. In this example it can be clearly seen that an abusive client directly impacts case management and decision-making. In this particular case this could leave the child vulnerable. Interview Three described a mother with a history of changing workers, 'she would complain and then the worker would be changed'. The worker felt in this instance that the client was complaining about workers who were challenging her on the possible neglect of her son. "It was frustrating and I said at the time that you know it is a shame that has to be the case, that that kind of – that she didn't get any letters saying that her behaviour was unacceptable all she got told was that she had a new social worker so basically what she did paid off to her because she got what she wanted" (Interview Three, NQSW, Council A).

Workers felt that the agencies almost 'allow' violence and abuse to happen because there are no consequences in place and overtly the agency do not set out expectations of clients. The agency is taking a 'back seat' when it comes to managing violence and abuse in the workplace. Many workers talked about personally motivated ways that they managed violence and abuse and the effects of this. Here Interviewee Two describes some practical ways to manage risk and the worker /client relationship:

"I will draw up rules very early on with my families about how they can express that, what they can do about those feelings, and put limits on those, like they can't attack me and I will walk away and these are the things that will happen – but those are personal things that I do, they are not from the agency or anything like that. I am personally motivated to do these things" (Interview Two, QSW, Council B).

Generally workers talked of an alarmist response from agencies triggered by an incident, rather than a methodical approach to minimising risk to workers. This links to literature that suggests agencies have a 'knee-jerk reaction to incidents' (Broadhurst, Hawkins and Briggs 2004). Workers commented that current induction processes and training were not set in place by agencies and therefore rather than training workers to deal with difficult and aggressive clients, agencies were responding in the aftermath of situations "I have never had any training from the local authority, ever. I am not even sure it is on offer. I don't even know if it is. Which says a lot really" (Interview Twelve, QSW, Council B).

In other cases, workers described how they had become complacent with regard to managing risk. This was either personal complacency or neglect on behalf of the agency. For example, in Interview One, the social worker states that she has lost her personal alarm but goes on to state "I don't get asked if I still have it. That is what I mean about complacency, they do not follow things up" (Interview One, QSW, Council B). Personal alarms are an item that as part of the lone worker scheme should be given to workers, however not all workers received one. Other policies in place such as calling into the office after visits, updating calendars, using code words in emergencies and joint working were all noted as areas where workers were complacent.

Staff reported that they were aware of these procedures but felt that these were not followed all the time by workers, managers or the organisation:

"I think you have to have very clear and systematic ways of doing things that are very rigid and I am afraid they are not. Certainly not here at the moment, I would say they are quite bad actually, I mean a lot of the time people don't know where you are, people don't phone in, people don't check where you are at the end of the day, managers get into the habit of not checking as some people are lax anyway, you really need everyone to buy into it" (Interview Two, QSW, Council B).



Workers highlighted that when this was not followed through it could, and had, led to workers being at increased risk of violence. As detailed in the previous chapter, one interviewee gave an example of a colleague who had been held hostage for three hours before anyone noticed she was missing. This highlights the risks workers take when policy and procedures are not rigidly adhered to. This is not monitored and so there is no organisational response or audit in place to ensure that procedures are being carried out. Several interviewees had attended a health and safety training session where the issue of complacency was emphasised:

“...we were doing some role play and it was supposed to be a family we were quite comfortable with but there was somebody strange in the house, and they did this thing where the person who was organising, the facilitator, suddenly put a knife on the table in front of everybody and you realise that there are some families that you go into that you are comfortable with and you are not, you don’t take enough notice of the one thing that has changed like in this case there was somebody in the house... so you are not listening, perhaps you have done your risk assessment in your head before you left the office but are you still doing it when you are in the house?” (Interview Sixteen, QSW, Council A).

One line of argument suggested that a lack of resources and staff caused issues with having the time to complete thorough risk assessments and follow procedures. The findings demonstrate that teams are understaffed due to sickness or stress. Many interviews detailed that child protection workers are not working in fully staffed teams, are holding over the recommended caseload and felt overworked. This led workers to feel that they had to ‘just get on with it’ and accept the ‘status quo’, despite not having enough time to ensure their personal safety. In these cases the agency should be ensuring that workers are safe, but in reality this is not happening.

In relation to this, findings highlighted a disparity between worker and management understandings of feelings, risk and impact in practice. Many workers felt that management were ‘removed’ from the realities of frontline practices. In turn they felt that they were not fully supported by managers in terms of risk management:

“[An incident] This was two to three months into my working life and it’s like what if something does happen? All my colleagues knew about it and they were supportive... it did just feel like the management weren’t totally serious about it. I don’t know but it was not very nice” (Interview Three, NQSW, Council A).

Organisational culture was discussed on many levels, but in particular workers stated that managers reinforced the culture of 'accept it and carry on'. Where this was not the case and managers were described as supportive, aware and understanding, workers were able to manage stress, fear and intimidation more effectively. Workers commented on 'good managers' and their significant role in workers feeling safe, secure and emotionally sound whilst at work. "If we stuck to what we are supposed to do and what the regulations say we should do then we would probably offer a lot better service" (Interview Five, QSW, Council B). This culture is reinforced by the organisations' lack of response and or endeavours to support policy and procedure in practice. To change this culture of acceptance, adjustments need to be made from the top.

### *Approach*

The worker's approach to a home visit, client and case were all affected when the worker felt at risk. Feelings of fear, intimidation and 'overload' left workers avoiding clients and lacking the confidence to challenge clients, and affected their decision-making.

"It is easier just to sit there and agree with someone than to sit there and say 'hang on what are you talking about, that is absolute rubbish' especially when you know that they are gonna explode. Getting them to come into the office is impossible most of the time, but then knowing you have to go out and wind them up, not on purpose to wind them up but what you are gonna say, you are gonna make them upset and then you have to walk away and leave the child in that house" (Interview Five, QSW, Council B).

Many workers recognised this and said that where they did feel this way they worked hard to maintain a professional approach. Workers discussed strategies that they employed to manage their anxiety: "You can only take so much in one day and you can't book, well you have to be sensible about booking your visits to people that are going to scream at you or are going to drain you and not have as much in one day and space it out" (Interview Five, QSW, Council B). Interviewee Five goes on to state that this is the 'ideal' way of coping, however in reality this does not happen.

Workers noted that risk of violence and abuse means that it is easier to listen to people and agree with them rather than challenge or unintentionally antagonise them, waiting to return to the office to do so. This was recognised as both an ineffective way of

working and a legitimate method of managing risk. “Yeah absolutely, so much so that I don’t want to have contact really, you know when they’re being so abusive and so awkward I don’t want to have contact” (Interview Nine, QSW, Council A). Where other workers felt their approach was being affected, they discussed using their informal support network to manage these feelings and mitigate the effect they were having on the case. Others stated that being reflective and having the time to do this was vital to client responses not affecting worker approach.

Workers discussed being aware of body language, the message they are there to deliver and communication. Many workers reported that they implement stringent boundaries when approaching their clients, which helps the client to understand the limits of what is acceptable. Workers commented on giving clear messages and carefully approaching difficult topics:

“I think people need to, I think we could be clearer with our clients at the start of the work and in things like CP conferences where most parents are listening, they are listening and saying that violence and abuse are not acceptable and it will be held against you not working with professionals” (Interview Five, QSW, Council B).

When discussing communicating with clients, several workers commented on starting with compassion and understanding that the message children’s social care delivers can at times be ‘hurtful’ and ‘difficult’ for the client. Often workers are telling clients that they need to ‘be a better parent’ or challenging families on their inability to look after their children. In some cases the family’s lifestyles are dictated by a child protection plan, which in itself can be frustrating. Thus workers felt that their job needed to demonstrate great compassion, and that in turn felt this reduced the risk of violence and abuse. “We have to take some responsibility as well, that there are ways of managing people, there are ways of having compassion and understanding that what we do is hurtful. So we should do that with some kind of respect, compassion and understanding” (Interview Two, QSW, Council B). During some interviews it became apparent that social workers are overcompensating in their approach to avoid violent or abusive incidents and at the same time minimising experiences especially with respect to verbal abuse. Many workers recognised this themselves when giving accounts of their work, often pausing and then reflecting ‘I have just minimised that’.

When discussing approach, the findings illustrated that certain frontline duties created

conflict in themselves, for example removing children or asking to see a child on their own: "Seeing kids on their own is difficult and can cause conflict. Certain activities make approach harder" (Interview Nine, QSW, Council A). In relation to workers' experiences of verbal abuse or indeed physical violence many workers attributed these experiences to approaching families with difficult or distressing news. In some cases when carrying out these duties, workers stated that when approaching difficult visits a worker must be honest and clear in approach. Interview Fourteen highlights that there are several stages before removing a child from their parents, and at each stage a parent has the opportunity to create change and reverse the process:

"...they are thinking 'oh my god I am getting deeper and deeper into this spider's web' if you like and there is no way out, but what they are not understanding is that in every process there is an opportunity to change, and some parents and I would hope most of our clients you need to explain that to them honestly" (Interview Fourteen, Manager, Council B).

In most cases workers who did not want to be abused would avoid these activities or not challenge a family. Knowing that certain activities increase risk should lead to appropriate recognition and thus more careful management by both the worker and the agency, so that workers are protected and families are appropriately approached and challenged where necessary.

Workers attributed tensions to a power imbalance and stated that when approaching families, they had to be mindful of the obvious power imbalance in the worker client relationship. "...I think it depends on how that person or client sees you and how and whether they see it as a power imbalance, which clearly it is, 'cos the role we have is quite a powerful role" (Interview Fourteen, Manager, Council B). Other workers commented that sometimes even whilst being mindful, the power imbalance can cause abusive incidents to arise;

"I think that sometimes we can come across as oppressive and some people would want to fight against that and I understand that as well. So I kind of think it is something that we should expect and accept" (Interview Eight, NQSW, Council A).

Workers stated that professionally they had to be proactive in approach to achieve a good working relationship with clients. Clearly a worker's approach can lead to violent and abusive situations, but at times being clear, honest and consistent in approach can diffuse potentially violent situations. This 'ideal' approach will be developed in relation

to quantitative statistics in the discussions chapter.

### *Time Management*

In several interviews, findings showed that time management affected workers in several different ways with relation to violence and abuse. In some cases workers found that if they lacked the time necessary to reflect on a violent or abusive incident, they only reported in 'exceptional circumstances'. One worker stated, "...compared to managing a busy caseload and having families and professionals constantly getting in contact with you, yeah you don't have a lot of time to follow through on these issues" (Interview Nine, QSW, Council A). Others noted that being busy meant they lacked the time to prepare for appointments or engage with a considered approach:

"I think everything else would improve if caseloads did, 'cos everything else would be much more manageable and you would have time to foster relationships with clients and you don't now really" (Interview Eight, NQSW, Council A).

In most cases workers felt stressed and run down as they were unable to take annual leave or claim TOIL (time owed in lieu). "You think 'oh I am too busy to take it'" (Interview Eight, NQSW, Council A). Workers didn't feel formally supported with the level of work expected and thus the knock on effect of time management and ultimately fractious relationships with clients led to a personal and professional negative impact. Workers tended to manage this impact informally, which is an area highlighted in the findings which needs to be developed when making recommendations for policy and procedure.

Seven-day deadlines for initial assessments and rigid child protection practices meant many workers felt their ability to form a rapport with clients was hampered. In some cases these deadlines were blamed for client worker relationships becoming volatile:

"...you have to complete statutory visits every ten days, write conference reports and court reports, on the other side of that you have to complete initial assessments in seven days, comprehensive assessments within thirty-five days, and it is a juggle" (Interview Three, NQSW, Council A).

If teams had another member of staff, workers would have more time, with more time comes more planning, more planning equals better outcomes for everybody, so that

would include staff, clients, management, statistics, so if I could give the social workers more time everybody would benefit (Interview Six).

## **Policy and Procedure**

Manager participation was seen as key to policy and procedure being effective in practice. When discussing the Lone Working Policy, one clear message was that the procedure did not work one hundred per cent of the time and often workers were unsure about the policy. In general workers felt that policy and procedures were only as good as their execution, which in most cases was lacking.

The final section of this chapter aims to assess the effectiveness of policy and procedure in practice. The following themes will be presented: coping strategies, training, risk management, procedures in general, Lone Working Policies and the 'ideal' according to staff.

### Common Themes

#### *Coping Strategies*

It appeared from the data that organisations lack the appropriate procedures to support workers in the aftermath of a violent or abusive experience. Workers were left to formulate their own coping strategies, or not; "I don't really have any coping strategies, you just have to get on with it really don't you?" (Interview Ten, QSW, Council A). Many workers talked about personal coping strategies; these workers commented that their coping strategies were in the main informal tactics employed individually.

This topic is analysed in an attempt to understand how the agency supports its workers via policies and procedures. A common denominator that was strikingly apparent in all interview data was the limited knowledge of what was on offer from the council to support staff in the aftermath of a violent or abusive incident. All interviewees noted that they thought there was a counselling service they could access but details were vague and most had only heard of it informally through colleagues. "I have been told that in other local authorities they have counsellors... I know on the intranet there is a phone number or something you can call" (Interview Five, QSW, Council B). This was true of both councils taking part in the study.

When asked whether they would access this service, the majority of workers stated that they would 'never feel comfortable admitting that they could not cope'. Many observed that it 'was not the done thing' or accepted. When probed further, on this topic staff felt that their professional integrity would be questioned if they showed emotion or an inability to bounce back immediately after dealing with a difficult client, or in some cases actual physical violence. "You can't admit to not being able to cope, you can't sit down and talk about your case to a counsellor over the phone" (Interview Five, QSW, Council B). In one council the support on offer was over the telephone, which workers felt was inadequate. There was universal agreement that a face-to-face counselling session would be more effective.

With regards to managerial support there were different responses. One manager recalled their own negative experiences as a frontline child protection worker. As a result of this, the manager made a point of treating workers individually, not expecting staff to just cope, listening to workers and ensuring that they felt safe in the workplace. Another manager did not know what was in place to support workers; "no there is not a method. I suppose if there is one I am not totally aware of it and I will have to put my hand up on that" (Interview Fourteen, Manager, Council B). There were varying levels of workers relying on their managers to help them cope with issues at work. Where workers 'trusted' their manager or felt that they could 'informally ask for support as and when', workers reported that they would use this relationship as a coping strategy. In other cases workers stated that they found sanctuary through informal collegial relationships:

"I find somebody else helps to bounce it back and thrash it out, was there anything I could have done, is there anything I could do in the future? Could I be more aware? Could I bear it again? The answer might be yes with this sort of help, or the answer might be actually I have had enough, I can't cope anymore" (Interview Thirteen, QSW, Council B).

In terms of informal coping strategies, many workers discussed hobbies and activities outside of work that they used to de-stress and 'offload':

"Go home and go for a run or go for a swim, just exercise, just get it all out, 'cos I don't think you can go home and get on with your life until you have some little patch in the middle where you can just vent. So I go for a run, think about the cases and then try and shut them out for a day, but then that is kind of infuriating too that you're on home time and you are still thinking about the cases to get them out of the way"(Interview Seventeen, NQSW, Council A).

The majority of workers used exercise as a form of 'venting'. Several workers chose to cycle or walk to work so that they 'had a break before they got home'. In many cases workers would talk to friends or partners but also stressed that by the time they got home they did not have the energy to talk. As mentioned previously, using friendships and personal relationships to cope led to staff losing friendships and in some cases even the breakdown of a marriage.

This trend underscores a vital need for better agency resources that help staff to cope with stress, anxiety and frustrations caused by frontline practice at work. For example, the agency might encourage staff to take longer lunch breaks or support staff in case management so that they have time to claim TOIL (time owed in lieu). Workers felt that if this was supported by the agency then this would help them to cope better with the stresses of being a child protection worker. Some workers suggested lunchtime meditation sessions, Pilates, a team away day or an office lunch trip.

The stresses and strains of being a child protection worker were evident throughout the findings. Large caseloads, reports and court proceedings are all demanding tasks. "I meditate, I do exercise, I take long walks... I would not sleep if I didn't do those things, not just because of the violence and abuse but because of the pressures of the job" (Interview Two, QSW, Council B). What happens then when a worker who is already overwhelmed with work is physically or verbally attacked by a client? Interviewees reported that they had developed personal coping strategies with little to no dependence on the agency procedures.

Taking time to reflect scored highly on workers' agendas when discussing how to cope. Although it was suggested that there was not enough time to reflect at work, several workers found time in their personal life. "Well I think you go home thinking about it don't you [...] especially if you can't get the right outcomes; you keep thinking, what am I doing wrong? Even if it is not something that you are doing wrong" (Interview Eight, NQSW, Council A). When interviewing managers, several reported that there was not enough time in supervision to reflect on how workers were feeling. Where the tool was in place to reflect, some managers were not using this procedure; "they have just brought this new tool in for reflective supervision which I haven't used... Oops I am on tape saying that" (Interview Four, Manager, Council B). Another manager recognised this new emphasis on reflection but also noted that in practical terms there is not enough time to do it:



"I think there is more emphasis on reflection now. As to whether they have enough time to do it truly is another matter. I think you end up doing it involuntarily to be honest because no matter how busy you are in the day, by the time you are getting to bed and your body has a chance to rest, you start to have flashbacks" (Interview Fourteen, Manager, Council B).

Workers talked about emotionally 'switching off' to serious incidents and becoming desensitised to otherwise upsetting episodes. "I will tell my housemates something 'cos I need to get it off my chest and they'll be like 'oh my gosh' and in your head you know that it is awful, but you're not giving the same response emotionally as they are. I don't know. It is weird" (Interview Eight, NQSW, Council A). This also demonstrates why workers may not utilise counselling services or report incidents to management. This underlines why relaxation is key to workers and, as such, why it is vital that agencies make time to provide workers with a greater level of support. Violence and abuse affect workers' health and also their ability to emotionally process traumatic events. In turn it could be argued that this inhibits their perception of risk to children and themselves.

### *Training*

Findings showed that workers perceive training to be essential to professional development. Many workers felt that training would help them manage difficult or challenging situations in a more effective manner. Interviewees reflected on training of this kind that they had found beneficial over the course of their career in social work. For several workers these proved to be the only training sessions that they had found useful, and in some cases this training was out of date. Child protection workers can expect an induction and a list of mandatory training sessions and this should be reviewed annually at appraisal. The qualified social workers in the sample group hold a degree in social work. Therefore all interview findings represent workers who have supposedly undertaken an induction, attended training and in some cases hold a degree qualification in social work.

Newly qualified workers commented that their university education did not teach them the skills needed in practice but did provide them with the opportunity to learn through good placements. The majority of workers were relying on training that they had, received in some cases, up to ten years ago. Thus most workers had not been recently trained in how to manage conflict. Most reported that they had not had any formal induction.

There were mixed reviews with regards to training in the interview findings. Interview Two reported, 'I haven't had any training in Local Authority social work ever'. The findings further demonstrated that the majority of workers had not had an induction in their current role. They also had not had training on managing difficult clients, risk assessment or personal safety:

"No, not since I have been here. So no, never in what, seven or eight years that I have been working in this field, has anyone ever gone through basic training like, when you walk into a house do you take note of whether the door is locked behind you? When you sit down do you choose to sit near the door or further away? Do you look around the room, do you know if they are drinking from a glass? And you know I have never had any training like that, and that being done on a regular basis, you know an hour [or] an hour and a half, just kind of plants the seed back in your head again, [which] would be really helpful" (Interview Ten, QSW, Council A).

This can be related back to the earlier comments on 'luck' rather than procedure. If workers are not trained in how to assess risk how do they 'stay safe' in the field? Where do workers learn these skills? Where workers attended risk assessment training, they reported that it was too generic:

"I don't think we are tight on our risk assessment, 'cos I remember having some training on risk assessments but it is generic across, so I was on training with a librarian, someone to do with farmers, all sorts of things, so it wasn't specific to social workers" (Interview Eleven, Assistant Team Manager, Council B).

Workers who had not attended training reported they were 'unaware of training opportunities'. Where this was the case, workers discussed research and trying to use online resources to develop their skill set and knowledge base. This again proved difficult as workers stated 'they were limited for time':

"Every time we get emails through with the latest research in practice link and case documents, every time I look at them and think, I won't delete it and will put some time aside to look at it, I never get time to read it ever. It is really sad" (Interview Five, QSW, Council B).

Workers did not feel there was enough post-qualifying training currently on offer. When asked 'what do you think could be done to improve the current system to support workers?' workers responded "I think training is one" (Interview Seven, Senior Practitioner, Council B). Staff felt that they were not prepared to deal with violence and

abuse. Staff felt there was an expectation from the agency that workers will find this skill set within themselves.

As training was an unreliable source of learning and development, interviewees reported that they learnt their skill set through peer support rather than organisational policy. A Senior Practitioner shared her experiences, stating: "Talk to people, talk to the team, talk to other social workers in the team, 'cos you learn from them. I mean you just learn from each other the whole time. I think that is the biggest thing for me" (Interview Seven, Senior Practitioner, Council B). Peer support and 'good' placements provided a beneficial source of knowledge and this was reported in the majority of interviews. This could prove a dangerous way to learn, as other workers' experiences may not be evidence-based or professional. It would appear that training is an area where policy and procedure need to improve. Lessons can be learnt from the informal learning networks that have already formed, however a structured learning environment, that is readily available, advertised and open to all, needs to be employed by local authorities.

### *Risk*

Prior knowledge of clients was said to be beneficial in assessing risk and planning accordingly. Whilst in some cases this raised workers' anxiety levels, being aware of a client's history (criminal or not) meant that staff could prepare more efficiently for home visits and meetings. "So for some people prior knowledge can affect them positively. They like prior knowledge so they can be prepared, but for other people it increases fear and anxiety" (Interview Six, Manager, Council B). Managers use this prior knowledge to assess risk to the worker and to effectively manage their team's safety. Therefore it is imperative to build good working relationships and approach cases with multi-agency involvement. Furthermore, waiting to gather information about clients before sending workers to conduct home visits alone is vital and certain interviewees reported that this was not always the case. One worker gives an example of how prior knowledge can support processes:

"With new cases that come in I guess if I have been told, like with this man I am trying to engage because I know he was violent in the house, he has lost his job and got depression, my supervisor has said, right, we need to take police out. That time there wasn't anyone in so next time I will probably take a colleague with me. Yeah I think if you have prior knowledge at least you can be prepared. If you didn't have that knowledge then you could go in and you might go

alone and not be wary” (Interview Three, NQSW, Council A).

As in Interview Thirteen, workers and managers talked about the ‘possibility’ of violence. “Well I do think the very first thing is you don’t ignore the possibility of threats and violence. I think you have to recognise that there is the potential” (Interview Thirteen, QSW, Council B). This potential leads most workers to feel ‘nervous’, ‘fearful’ and ‘intimidated’ when approaching families for the first time, conducting home visits and chairing child protection meetings. “You realise how vulnerable you are, if I am not sort of on my guard all the time, watching over yourself. You are always on your guard, that’s the only downside of this job” (Interview One, QSW, Council B).

Procedures and policies in place to assess and manage risk did not alleviate these feelings. There is a clear anticipation that violence and abuse is omnipresent and there is a definite sense of fear amongst staff of potential for and the possibility of violence. How can the procedures in place be more effectively used to ensure workers feel protected in practice?

When provided with information about clients, workers reported that this helped them plan visits. Information reportedly provided workers with the opportunity to work in partnership with the police and other agencies:

“I wouldn’t just send someone out, if it was that high [risk], what I have done in the past on several cases is have a contact with the police and ask them to be there when we are there but not actually go in, just literally be outside and they can be there and in, ‘cos sometimes if you bring them in it can make it worse sometimes, it can be inflammatory” (Interview Eleven, Assistant Team Manager, Council B).

Prior knowledge here meant that clients who were believed to be dangerous were asked to attend appointments at the council offices. A worker from council B describes below how they deal with clients with criminal convictions:

“The ones I know have criminal convictions I tend to invite in here so I wouldn’t necessarily go to their house. The ones that I have to visit at home even if they have convictions or I feel that are in anyway concerning. I just always take someone with me and I would plan what we are going to say on the visit and I would plan where the trigger points are so I would know, what it was I was going to ask and what their possible response might be, so there is planning and there is sharing info with others before I go for the visits. So I have an idea of what happens if, what happens during and I can deal with that. So planning is essential” (Interview Seven, Senior

Practitioner, Council B).

Where workers are unable to conduct a joint visit, on occasion they suggested they would ask a client to visit them in the council offices. Many workers commented that 'it is almost impossible to get clients to attend at the office' but this is another option used to ensure worker safety. "I suppose if I was genuinely worried... then I would take somebody else with me or invite someone in and do an office appointment rather than a home visit" (Interview Eighteen, QSW, Council A).

Without information, there is no opportunity for workers to plan. "No planning put us at huge risk!" (Interview Fifteen, QSW, Council B). In this case, the worker was held hostage by a father for two and a half hours until the police attended. Interview findings provide evidence that suggests where visits were not planned, risk assessed or there was a 'knee jerk reaction' to a referral, in all cases this led to the violent and abusive incidents reported by staff.

Risk assessments are in place, and in most cases managers and workers take safety seriously, but procedures are not always followed. In certain scenarios managers and workers are aware there is a risk to staff, but due to a lack of resources or staffing, workers are still sent out alone in the hope that they 'will be OK'. Findings show a substantial number of incidents that prove that risk assessments and workers' safety need to be paramount. Effective procedures must be followed all of the time if violence and abuse are to be avoided. Currently, findings demonstrate that councils employ a 'tokenistic' approach to worker safety.

Many workers felt that the problem with risk assessments was partly due to the difference in forms. Reportedly there is not a generic risk assessment form used within child protection teams. Equally there is no generic form within the organisation, thus when children's social care receives a referral from another department, service or agency, in some cases these forms are not relevant or detailed enough.

According to Interview Fourteen, risk assessments are useful when; "...they are done appropriately and they are up-to-date" (Interview Fourteen, Manager, Council B). This manager goes on to highlight that when risks or incidents are reported on an incident form that, "in terms of incident reports I am not really sure even in my level what happens to them, you know they get recorded but [as to] what happens to them I haven't got a clue. It seems to go into the ether somewhere and I am sure it must turn

up somewhere” (Interview Fourteen, Manager, Council B). In this case, incidents that are recorded appear not to be fed back into a system of intelligence that could aid in keeping policy and procedure up-to-date and relevant.

Workers describe risk assessments as a ‘box-ticking exercise’ that is largely ineffective in practice. They feel that the responsibility of managing risk falls to them, and that they informally assess risk with little input from managers or the organisation. This responsibility leads to workers feeling unprotected, uncomfortable and unsafe.

Workers felt violence and abuse was unpredictable, unknown and is largely due to clients who are under the influence of drugs, alcohol or suffering from poor mental health. Where clients are known to have these issues or are convicted criminals with a history of violence, workers felt that they should be better supported by the organisation and policy. “I have learnt, as a professional in your own right you need to take responsibility for deciding whether or not you feel safe doing a visit, although managers are obviously supposed to have an oversight and, you know, check the history, the reality is that that just doesn’t happen. There isn’t the time to do that” (Interview Ten, Manager, Council A). As discussed previously, workers are managing their own coping strategies. Findings suggest that in the main workers are also assessing and managing risk informally rather than opting to or being aware of policy and procedure in place to protect staff.

### *Procedures*

Interview findings showed that workers were aware that there were procedures and policies in place with relation to violence and abuse. However, further analysis highlighted that workers had ‘no faith’ in these procedures and felt that it was the delivery of said procedures rather than the policy that mattered in practice. Several workers recalled working for ‘good managers’. The description of a good manager was one who proactively followed procedures, thus demonstrating to staff that they were capable of managing workers’ safety and wellbeing. One worker reported: “So do you think that it is dependent on the manager rather than the procedure? Yeah definitely” (Interview Eight, NQSW, Council A). Other workers reported that managers did not follow procedures and some were unaware of procedures. This meant that they did not know where staff were, they had not seen or used risk assessments and workers felt that they could not report incidents. In these examples workers did not use procedures but rather built informal support networks and ways of working:

"I can think of cases where if someone is going out to see someone who is high risk, and has tried to attack social workers, then everyone is aware, so yeah there is a procedure in place but it gets lost along the way. You do attend those visits and no one takes any notice anymore. So yeah, it is there but it is not followed through all the time" (Interview Five, QSW, Council B).

In some cases managers were aware of procedures but didn't understand how they could effectively be used in practice. Interview Four highlights the shortfalls in the current Lone Working Policy and procedure:

"Say I said to the social worker, 'you are going out on a visit, give me a ring and tell me you are alright', sounds a good idea don't it? But then if she don't ring what am I gonna do? Who am I gonna ring? You don't go through with that next bit, or what if I go home and she says she is going to ring me and I start watching Eastenders and I forget about it, what am I gonna do about ten 'o clock [pm] when I think 'Oh God so and so was supposed to ring me' and this has happened and I ring 'em and they say 'Oh God I forgot to ring you'. So we have both forgotten to ring each other. It sounds like a good idea in theory but it's not, when you start breaking it down into its various components it is not as easy as it looks at first sight" (Interview Four, Manager Council B).

Interview data suggests that a lack of time to read health and safety policy and procedures leads to workers and managers lacking confidence in practice. Confidence and understanding relates back to the reported culture of 'do it anyway'. With respect to procedure, the organisational message here appears to be that the child and family's safety is paramount over and above worker safety. What would happen if a worker tried to follow procedure and refused to work high risk cases alone? Findings illustrate that child protection workers work very much 'in the moment' with limited time to prepare or 'read ahead'; some workers likened this to the way clients live, 'chaotic and reactive' in approach.

In relation to managers playing a vital role in the delivery of procedures, some workers gave accounts of managers who had not been supportive. Workers stated that in these cases procedures were key to being able to challenge managers on their lack of support. Procedures therefore can hold managers accountable for their practice. The following account from interview sixteen was a common experience amongst interviewees:

"I have swapped managers recently and if I text her at the end of the visit to say I am OK, she will respond and that is what I like, to be able to know that there is someone out there who is

aware you are still out in the community. Previous to her, I had somebody who switched their text off when they left the office, so we could have had all the lone working policies in the world and that we wanted but if your manager has not got their phone switched on then, and if they know their workers are out, then the policies are meaningless” (Interview Sixteen, QSW, Council A).

Workers felt that underpinning policies were needed to hold managers accountable but felt this was not enough. In an ideal scenario, managers would value the work of child protection staff and have a better understanding of the risks involved. Managers who do not provide supervision as stipulated (every month for one and a half hours) are neglecting staff needs and in turn workers are left feeling undervalued and unprotected by those in a responsible position. Therefore this raises the question of whose responsibility it is to manage risk in the workplace. Interview Eleven discusses the issues of policies in practice:

“I think that the policies and things that are there are sufficient but they are not used, so it is about people actually using them and recognising that there is risks out there rather than normalising it like I was saying earlier it is normalised, it is normalised and so they don’t see that as a risk as such. It is about managers making sure we do risk assessments and look at what we have got” (Interview Eleven, Assistant Team Manager, Council B).

Risk assessments are only as good as the people who are completing them and only as good as the information that they are based on. In practice workers felt that they were going out and knocking on ‘stranger’s doors’ and ‘walking into stranger’s homes’, not knowing who they are or who might be visiting them. To an extent, workers are therefore managing an unknown risk. Managers are asked to manage two issues: man management, ensuring that staff are trained in completing risk assessments effectively, and secondly that staff are following the procedures in place where a risk is flagged.

The resonating conviction from all interviews was that policy and procedure were not ‘good enough’, they are not robust or rigid and they are not followed through in practice:

“I was discouraged from reporting it to the Police because it would have been a problem. I don’t think procedures are good enough, I don’t think they are formal enough or robust enough and clear enough really. I think people think it is just the way it is and I don’t think that it has to be just the way it is. I think that you could promote a sense of how you want people to respond to you and we are not taught that very well” (Interview Two, QSW, Council B).



Workers felt the answer to underreporting was to have tighter security, to better manage scenarios that invite violence and abuse and follow procedures 'one hundred percent of the time'. Workers felt that more could be done to enhance team spirit and peer support as the majority of workers felt their informal networks were invaluable in practice.

### *Lone Working Policy*

The Lone Working Policy requires that workers carry a work mobile phone with them at all times in case of emergency. It states that workers should have personal alarms; joint work difficult cases and teams have code words for workers in need of assistance. Some teams employ the use of a 'whereabouts board' or use calendars online so managers and duty workers know where staff are on a daily basis. The Lone Working Policy is employed to protect social workers who are working alone in the community. Does this work in practice?

As with general procedures, workers commented that the Lone Working Policy needed to be 'better thought through'. A manager summarised this when discussing how the lone worker policy is supposed to work; "by the time I have got home I don't know the address of the house they have gone to anyway will I? Cos I don't keep all the addresses for all our clients in my head and I don't have access to the database at home and the database is probably wrong anyway" (Interview Four, Manager, Council B). Workers are supposed to call into the office every time they finish appointments and at the end of the day, in reality it would appear that this does not happen. The ineffectiveness of the policy is due to worker and manager disengagement:

"Sometimes you forget and then you text when you get home but she does raise it a lot in our team meetings. She was always the best when we were in our old teams. There were three supervisors and now they have become team leaders and she was my supervisor then so I was lucky, but other people, they might not have the same sort of safety with their new managers 'cos they didn't leave their phone on" (Interview Eight, NQSW, Council A).

Workers reported they found it 'shocking' that social workers were still expected to visit homes alone. Many workers related this to police work, noting that 'police always travel in pairs'. Many workers reported that even where there is a risk to a worker or a 'hazard on the system' they will still be expected to conduct home visits alone. Interview Eight

explains the disparity between the approaches of social workers and Police officers:

“What is quite surprising sometimes, is we will go out to families’ homes and we will have a hazard on the system or something like that and we will look into it but we will still go out on our own. Then sometimes, say for example if we ask for police assistance, sometimes they will send two police officers, not just one, whereas we will usually go out on our own” (Interview Eight, NQSW, Council A).

With regards to workers using the Lone Working Policy, staff had ‘little faith’ in the system, stating that if they were being physically attacked ‘having a mobile phone would not protect them’. There was disparity between those workers who had been given a personal alarm and those who had not. Workers said that when they did use the Lone Working Policy and texted or called managers at the end of the day, in many cases managers would have their phones switched off. Here there was difference of opinion amongst interviewees. Some workers had managers who would answer their phones at any hour of the day, and others had managers who would not respond to calls. This left those neglected workers feeling insecure and disenchanted by the lone working system. Where codes were used, managers and workers alike were unsure what the codes were. In a handful of severe cases when a worker called and used the code, the emergency was ignored because the person in the office was unaware of the system. In other cases, workers could not recall during the interview what the code was:

“The code word here was ‘can you cancel my meeting with the chief executive’ or something like that but we don’t have anything like that here now, I would probably just say ‘help’” (Interview Three, NQSW, Council A).

“Code – I can’t remember the code. I will have to go back to the team meeting and bring that up” (Interview One, QSW, Council B).

Where codes and phones are failing to make staff feel safe and secure in the line of duty, joint working seems to be a popular second option. “We do have policies in place, we do have the lone working so [...]if you feel threatened by a particular family then we will take a partner with us” (Interview Nine, QSW, Council A). Interview data found that in practice due to staffing shortages and a lack of resources, joint working does not happen as often as it is required or desired. Joint working or co-working a case with a

colleague is apparently not factored into workload and thus when asking colleagues to conduct a joint visit, workers can find that there is no one available at that time.

### *Ideal*

When discussing policy the majority of workers talked of an 'ideal' or 'utopia'. They illustrated an ideal working environment and what that would look like from a policy and procedural viewpoint. Some of these ideas were 'grand' and seen by workers as unrealistic whilst others talked through more pragmatic approaches to issues they were currently experiencing, for example clinical supervision, group therapy, consequences for clients, pay rises and bonuses. One manager describes how they see the ideal:

"If we were better resourced we would have more time to think about these issues, in exactly the same way we would have more time to think about all issues. I think you need a motivated workforce, working in a place that clearly cares for you and I think it'll all follow on behind that. Give them a rise once in a while, don't take away two thousand pound recruitment and retention bonus, don't overload them with too many cases" (Interview Four, Manager, Council B).

Clinical supervision was high on the agenda for interviewees. Most workers felt that supervision was not an effective tool to manage feelings or discuss anything other than case management. As a solution to this workers felt having a separate session of supervision, specifically clinical supervision, would aid them in their work:

"I think we should be offered supervision from a clinical psychologist who can come in and see everybody as well as the manager. So the manager can do the line management and decisions and processes and the clinical psychologist can do it in terms of what is your effect in this situation" (Interview Five, QSW, Council B).

"I think we should have clinical supervision. We used to have that when I was self employed, I paid for clinical supervision, and it was wonderful" (Interview Two, QSW, Council B).

Workers felt that the structure of clinical supervision, talking about feelings toward the case, opening up interesting insights into how workers influence what happens in the family and how workers are affecting the dynamics, would be helpful. This also underlines the importance of reflection and how strongly interviewees felt about having time to reflect. This could help workers understand how they are changing their approach to a case, for example, being scared of someone might mean a worker avoids home visits.

Currently, other than supervision, there is no formal resource for debriefing and workers want this to change. Many workers were promised a 'debrief' after their violent or abusive incident but in all cases workers didn't know what this meant, and in reality it was never provided. Workers were left 'carrying' these worries and feelings after an incident. Some workers attributed 'breakdowns' to not having sufficient time or methods to offload difficult cases, visits or incidents:

"I think a debriefing, looking at what happened, I think that would be incredibly helpful. We don't do that enough cos I think we have a lot of support and experience in the teams and to actually look at dealing with clients, not just in violent situations but in any situation as well, and having a debrief at the end of it by managers would be really helpful cos looking at what happened, how it happened, a different understanding on it, a different slant on it would be good" (Interview Seven, Senior Practitioner, Council B).

There was a general consensus that violent or abusive situations needed to be deconstructed, in an attempt to discuss how workers and managers can stop incidents from happening again. Workers felt that debriefs were undertaken in the form of serious case reviews regarding families yet they were not conducted when there was a serious incident for a worker.

In relation to clinical supervision some workers felt that this would be better conducted as a group. "Clinical supervision as a group, I say group 'cos it is less intrusive if it is a group you feel less kind of singled out you know" (Interview Fourteen, Manager, Council B). As previously mentioned, peer support scored highly when coping with difficult situations in the workplace. In some teams peer support had been informally supported, however due to demands on time this has reportedly ceased:

"We used to do peer support group every second week but that has dwindled away cos people don't really have the time and that used to be really supportive, 'cos you would come and it was just with colleagues no managers, you could just talk about bad situations really and colleagues were really supportive with that. I think that is where we would all confess to not sleeping and oh I was really worried. So that has been really helpful but that hasn't been a management thing, that was very much kind of frontline practitioners that put that forward" (Interview Seventeen, NQSW, Council A).

During the interviews workers admitted to not being totally honest or open with managers, feeling that their professionalism would be called into question. This happened even where there was a good relationship with a supervisor. Workers felt

their informal support networks were where they could really offload and open up and as such group therapy would be a beneficial outlet for staff. By writing this into policy this would show that the agency care about and want to support their employees.

Developing this idea of group support, Interview Two reported that managers have workshops once a month, which are in the main informative sessions but also a chance to network with other managers across all departments:

“The workshops are facilitated and they have a plan, but the most useful thing is getting a feeling of consistency between you all, feeling as though you are not alone. Realising other people have had similar issues, discussing how they sorted that out so that you can sort it out, that sort of thing. There are themes, and reflection time and time to moan. They can be constructive as well” (Interview Two, QSW, Council B).

As well as ideas for supporting workers, interviewees were very passionate about consequences. All workers felt that there were no consequences for clients who verbally or physically attacked a worker. In most cases workers reported that the client was simply given another worker instead of tackling the problem. Workers felt that the agency ‘played the client’s games’. Findings showed that this affected the decision-making and case outcomes, in many of these cases families would be re-referred to children’s social care and as such the children were left at risk. Interview Eighteen reported the lack of consequences for perpetrators:

“No, there are no consequences for people whatsoever which is why I think they don’t really care. There is probably a fairly toothless policy that states all council members have a right to be, all council employees have the right to be treated with respect and courtesy but actually that probably applies more to the people downstairs on reception. It is accepted that within social work you take a certain level of abuse and aggression from people, that is just what you do” (Interview Eighteen, QSW, Council A).

This goes back to the earlier point raised by workers who said it was important to feel as though they were cared for and supported by their employer. Policies should firstly take this into account and then procedures should be monitored to ensure they are put into practice.

## Conclusion

The qualitative data illustrates that there are several underlying themes to the topic of violence and abuse in child protection work. Workers reported that they came into social work to help and support people but were left feeling scared, hated, abused, and wrung out. Most child protection staff stated, 'this isn't what I signed up for'. It was concerning that throughout the interviews only two workers gave an emotional response to recounting details of their experiences.

In many cases workers admitted to withdrawing services or changing their professional decisions as a reaction to violent or abusive episodes. Many workers struggled with the feeling of neglect: 'if we have to go out in twos how is it safe to leave those children in the house? If it is not safe for us, it is not safe for the children'. Where there was a lack of engagement from the family, workers reported avoiding contact and closing cases so as not to cause further conflict. Avoiding families, phone calls and home visits can all leave vulnerable children at risk. Therefore findings clearly demonstrate that violence and abuse have a direct impact on how child protection workers approach and work with a family. This will in many cases override prescribed processes and procedures.

Current policies and procedures are fundamentally ineffective, and workers reported having 'no faith' in them. Workers stated that procedures failed where they were not followed or executed appropriately in practice by staff and managers. Risk assessments are seen to be a bureaucratic exercise that does not gather the information required to make an informed decision as to how to manage risk. Where risk assessments were used, based on the assessment in several cases, guidelines were not followed and workers were sent out regardless of the dangers. In some cases workers were given no information prior to home visits and thus were unable to prepare. This left workers feeling anxious and fearful.

As a result, workers wanted to see more joint working, and a greater degree of proactivity toward managing staff safety by managers. The findings show that procedures and the Lone Working Policy in particular are reliant on management. Reportedly in several cases managers would have their phones switched off at the end of the day, they would not track staff whereabouts and showed a lack of enthusiasm for procedure. Workers described how feeling safe and supported at work was dependent on the manager, team, department and local authority. This led to many workers

feeling unable to share feelings openly and honestly in supervision with managers. This means that an accurate assessment of stress levels, anxiety, fear and intimidation cannot be made by management. In turn this would make it difficult for the organisation to ensure staff safety and emotional wellbeing.

Good induction and training is vital to having a team of well-skilled workers according to the interview findings. Yet councils appear to depend on personal skills and background to provide this skill set rather than training and education provided by the organisation. The organisation also relies on this at the frontline where workers are negotiating potentially violent and abusive clients. Social workers reported that they therefore 'learn by making mistakes'. These workers state that by being clear, confident and direct, staff are less likely to experience violence. They relate this to violence coming from a place of fear and anxiety from their clients.

Staff felt that if they were more readily able to take TOIL, annual leave and lunch breaks that they would be better able to manage the emotional impact and affect of violence and abuse. Workers report, however, that in reality there are no perks in the child protection role. Workers do not get paid overtime or have time to claim back TOIL. As well as this, not all workers are aware of what support is offered in the aftermath of an incident. Many felt the affect of violence and abuse was twofold, the personal impact on home life and relationships and the professional affect on case management and approach.

The overarching theoretical concepts that have emerged from the themes described are 'Individual', 'Team and Management' and 'Organisational Culture'. These will be developed in the discussions chapter. The themes illustrate that the contributory factors for violence and abuse are the organisational culture and systems, these appear to influence worker and client responses. It could be argued that the systems, policies and procedures generate violence and abuse. Team spirit and management can provide a safe haven for workers but where managers are not proactive this can lead to a worker being put at risk. Finally, the individual worker is often held responsible as a possible catalyst of violence and abuse but also as the instigator of managing risk in the line of duty. The thesis will now take all four findings chapters and analyse these in conjunction with current literature and Beck's theory; the discussion will be presented in the following chapter.

## Chapter Eight: Discussions Chapter

*“Over my career as a social worker I have experienced everything from verbal abuse to physical assault with a weapon. The support from my employers has varied dramatically” (QSW, Council A).*

### Introduction

The purpose of this chapter is to consider the key findings from the qualitative and quantitative chapters, within the context of the reviewed literature, relevant theories, and Ulrich Beck’s risk society thesis.

The central aims of this thesis are to ascertain the form and frequency of violence and abuse in practice, to further understand the experience of workers and to investigate the effect of violence and abuse on professional practice. Finally, a review of current policy and procedure will be undertaken. This chapter therefore aims to draw together literature, theory and findings in an attempt to conceptualise the impact of violence and abuse on child protection workers.

This chapter will focus on the individual, the team and the organisation as the key contributory factors to the prediction, prevention and production of violence, and the protection of staff experiencing violence and abuse on the frontline. Findings from the online questionnaire and semi-structured interviews established the individual, the team and the organisation as the overarching theoretical concepts thus providing the rationale for the chapter structure.

### The Worker

To contextualise the child protection worker’s role, the following section will provide an analysis as to how the individual child protection worker influences violence and abuse in practice, beginning with an examination of the impact on the individual, their feelings, and furthermore the expectations placed on the individual worker of risk assessment and management. Following this is an analysis of the idea of risk and ‘luck’ in practice, exploring the issue of whether risk can be predicted or whether experiences are down to chance and luck. Current and relevant literature (Littlechild, 2003) provides evidence demonstrating that certain tasks carry greater risk, suggesting that risk, violence and abuse amount to more than luck. Workers’ individual experiences in practice, their



resilience and vulnerability, will be examined alongside Beck's theory of biographies, lifestyles and experts.

### Individual

The focus in this sub-section will be on the individual and their role in assessing and managing risk. According to the literature there is an increased concern amongst practitioners with regard to violence and abuse at work (Breakwell, 1989). This 'concern' will be further explored by analysing the child protection workers' feelings of fear, threat and intimidation in relation to violence and abuse in the workplace.

According to Beck (1994) and Gidden's (1993) idea of 'reflexive modernisation' and 'individualisation', distrust and anxiety are fuelled by the transference of responsibility from organisation to worker. The concept of individualisation will conclude the section examining how workers are increasingly expected to be solely responsible for risk management, personal feelings and the impact of an apparently increasing risk of violence and abuse in the line of duty.

### *Personal Impact*

Findings from this study show violence and abuse to have both a physical and psychological impact on workers. This reflects the findings from relevant literature and supports Beck's ideas regarding feelings of anxiety and fear brought on by risk and incident.

Contemporary social work literature suggests there has been an increase in forms of indirect violence such as threats, intimidation and verbal abuse (O'Connell, 2004). This thesis therefore included an exploration of verbal abuse, intimidating body language and threats (written or verbal). The findings from this study show that in several cases workers felt that there was always an underlying 'intimidation factor'. In all cases, being exposed to this intimidation factor increased feelings of anxiety and fear for the worker. The long-term effects of feeling intimidated were stress, insomnia, mood swings and persistent anxiety. The findings demonstrated that to some extent workers attributed the impact of workplace violence and abuse to the form of violence experienced.

The impact of violence and abuse on the worker, whether psychological or physical, is incalculable prior to an incident. This means that the impact is unique to each worker.

Previous research and findings from this study found effects to be dependent on the individual worker (Pahl, 1999; Stanley and Goddard, 2002; Littlechild, 2002 and Littlechild, 2005). Workers can suffer long-term debilitating effects. One worker interviewed had suffered two mental breakdowns whilst others had been signed off sick with work-related stress. With workers reluctant to report incidents, let alone their emotional state, it is difficult to calculate the true impact of violence and abuse. The findings from this study and previous research only touch the surface of the professional and personal impact of violence on workers. Beck argues that people managing risk in a post-traditional society are living with anxiety and fear on a frequent basis. It is possible that fear can provide researchers with some idea as to how working in a highly risk adverse environment can seep into every part of a worker's life, leaving them tired and fraught.

Threats, intimidation, risk, violence and abuse were 'blamed' for the breakdown of intimate relationships, marriages, friendships and losing touch with family. Therefore the impact can be seen to have a ripple effect. It was found that everyday risks, daily verbal abuse, weekly threats and in some cases monthly experiences of physical abuse have an impact on not only the worker but those around them. This study found that workers often became the aggressor at home. Literature suggests that workers isolate themselves, which is reflected in the findings that workers lose touch with close friends and extended family as a result of their struggle to cope with violent incidents. Clearly a work-based experience can then have a personal impact. Beck would argue that risk is felt as a society and has therefore recognised this ripple effect. Fundamentally, there is a need for professionals to be better managed so as to lessen the personal impact and ripple effect for staff.

Whether threats were serious or malicious, workers reported feeling nervous, 'shaky', anxious, distressed and having sleepless nights. The impact of this meant that workers were practising while feeling frustrated, physically tired, demoralised and lacking conviction. As with Beck's idea of a society-felt phenomenon, literature found that negative statistics on risk, violence and abuse heightened workers' feelings of stress and anxiety (O' Hagan and Dillenburg, 1996). This study highlighted that stories from 'colleagues or friends' about experiencing abuse at work led workers to believe that violence was more commonly experienced in social work practice. When viewed

alongside statistical evidence, this implies that the question to be asked is whether hearsay is leading to workers exaggerating the scale of the problem in practice.

Social workers are eight times more likely than any other professionals to be attacked whilst at work (DoH, 2000). This 'increased likelihood of violence in social work' along with other negative statistics fuels anxiety amongst workers and this was found to be true in literature and indeed within this study. There are several contributory factors prior to a home visit which can impact on a worker's wellbeing; it is not purely statistical evidence which leads workers to feel anxious, stressed and fearful. According to Beck's (1992) risk society thesis, social services are dealing with average risks that are socially unequal in distribution. Social workers are entering the homes of criminals, people suffering with mental illness, and individuals using or under the influence of illicit substances or alcohol.

Social learning theory and Freud's perspectives on innate aggression may explain why the client group of child protection workers are more likely to be violent and aggressive. As previously discussed the processes and procedures carried out by social service agencies by their very nature can in themselves provoke violence and abuse. With Freud's theory if individuals are innately aggressive this would suggest that when put under extreme emotional pressure or where placed in situations that evoke strong emotional responses it is only natural and to be expected that individuals would respond with violence or abuse. With regard to social learning theory, where workers are engaging clients who have a criminal history of violence, again this would suggest that there is a strong likelihood that due to learnt behaviours these clients are more likely to respond violently.

Therefore, if Beck's theory and Department of Health figures are taken into consideration, social workers are more likely to experience the full impact of risk and the dangers these risks present. Social services are providing a universal service but are they understanding or managing the risks inherent within the role? Workers who are aware of this 'unequal distribution' will, as has been documented, have feelings of pressure, anxiety, fear, stress and as part of this will experience sleepless nights, and over or under-eating for example. How is this managed in practice? According to Kemshall (2001) workers are providing a risk-based service and therefore are themselves at risk. Policies and procedures are supposedly in place to alleviate these feelings and tensions, but they appear to be ineffectual in reality.

In the majority of cases, the worker–client relationship is described as negative and abusive from the very start. Workers are expected to work harder to forge relationships with clients as they often start off on ‘the wrong foot’. Child protection workers carry out their jobs in highly emotive and fluctuating circumstances. Waddington *et al* (2006) found that child protection workers had a very similar relationship with their clients to that of their colleagues in the Police. Workers during interviews (in this study) described their frustration that Police officers appeared to have more support pre-visit and post-incident, worked in pairs and enjoyed a more supportive environment compared to their roles in social services. In other cases, workers noted the similarities in the role of the child protection worker and the Police officer. Literature suggests that social work clients very rarely entrusted themselves into the care of social workers. This study found that workers often felt that their working relationships with adult clients were fraught and frequently abusive but ‘put up with this’ and tried to appease perpetrators as this was the workers’ only way of getting access to the children.

Beck and Giddens argue that the risk society is distinguished by insecurity, which is supported by workers’ documented feelings of fear. Workers lack security in a fluctuating and chaotic workplace and, currently, this insecurity is not managed effectively by policy or procedure. This is further supported by the work of Littlechild (2008) and Kemshall (2002) where they present concerns that too much emphasis is placed on the ability of basic risk assessments to predict risk and protect staff. Stanley and Goddard (2002) examined the emotional, intellectual and physical isolation of child protection workers. Findings from this study supported Stanley and Goddard’s conclusions that workers were feeling isolated in the aftermath of a traumatic incident, whether this be verbal or physical. This study would therefore question what is in place for child protection workers post-incident and why current efforts to support workers are failing. It is clear from literature, theory and findings that of utmost importance to staff is the need to feel secure and understood in practice (Stanley and Goddard, 2002 and Littlechild, 2005). Where this is the case, workers report limited personal and professional impact.

### *Feelings*

Gill *et al* (1999) found the feelings evoked by experiences were different for every worker. The experience of violence and abuse is unique to every worker, thus so are the associated feelings. This difference emphasises the disparity between feelings and

actual incidents of physical violence. This study found that being exposed to bad language and venting of frustrations led at least eighty per cent of workers to feel intimidated, anxious and threatened. While placing an emphasis on impact, this also demonstrates that regardless of individual feelings there are certain aspects of violence and abuse that can be universalised. For example, the majority of workers used the same coping techniques to handle the impact of their experiences. In all cases, workers were negatively affected to some extent by violence and abuse and although the impact varied, this evidence should be used to better assess, manage and implement support for staff.

Beck argues that the risk society now demands that the individual cope with the fear and anxiety produced by a risk-aware society. How then can the organisations which supposedly generate risks better support the individual worker to manage them? If, as Beck states, there is an essential 'cultural qualification' to handle fear and insecurity, how do child protection workers develop the skill set necessary to survive everyday practice realities? By establishing regulatory bodies such as the Social Work National Occupational Standards, the GSCC (General Social Care Council) and more recently HCPC (Health and Care Professions Council formed in 2012) the impression is given that individuals are led by governing bodies. This provides professionals with a set of guidelines and values but it is left to the individual to provide this 'innate skill set' or 'cultural qualification' to manage the demands of the risk society and child protection arena. The question to be asked is 'can cultural messages be taught?' Munro (2011) would argue that these systems, which entail deadlines and unrealistic expectations of staff, in themselves create and fuel an anxiety amongst workers.

In 2004 Newhill found that being threatened can lead to long-term stress and absence from work. During the interview process undertaken for this study, six candidates did not arrive for their interviews as they had been signed off by their doctor due to stress. Recently, when presenting findings to a council participating in this study, a manager disclosed that a newly-qualified social worker had been signed off for two weeks following an incident where she was threatened by a client. In the thesis there are numerous stories where the individual impact of violence and abuse has led to a long-term debilitating physical injury or mental illness, arising from overwhelming feelings of no longer being able to cope. In some cases these feelings led to depression and acute anxiety brought on by extreme stress and overwhelming feelings of helplessness.

Workers described having diminished confidence where staff had experienced violence and abuse and had not been appropriately debriefed or supported. In this study, newly qualified social workers often spoke about battling personal feelings of 'why do I do this?' and 'I didn't become a social worker to get abused'. The impact of violence on social workers' emotional wellbeing included feelings of incompetence and failure, feelings of guilt and shame, a sense of personal responsibility, feelings of anger, a sense of vulnerability and denial.

It can be argued from the findings of this study that experiencing constant verbal abuse increases the impact on workers and causes psychological distress leading to physical symptoms of stress and anxiety. Verbal abuse has not been recognised in previous literature, but it was found to be a daily experience in this study. Furthermore, in the 'qualitative data analysis chapter' it was found that the feelings evoked by violence and abuse, even where it is non-personal communication, have a negative impact on child protection workers.

### *Individual Management*

Beck's (1992) concept of individualisation illustrates that individuals are asked to manage risk personally. As child protection workers, staff are bestowed the responsibility of assessing risk to vulnerable children with whom they work. Workers are therefore managing risk to self and risk to those children who are vulnerable to abuse at home. Munro (2011) notes in her report on children's services, that too much time is being spent meeting deadlines and in the office. Therefore, workers are unable to spend valuable face to face time with the families which they are trying to engage. Broadhurst *et al* (2004) found that the child's needs were secondary to those of the perpetrator. In assessing risk to the family and child, child protection workers are said to feel guilt when they fail to do so effectively, or when their duties could be seen to increase risk to the child living at home. Stanley and Goddard (2002) found that the social workers' needs were considered less important than protecting the child by workers and managers. In an attempt to protect the child, instead of leaving a risky home visit, this study found that workers put themselves at increased risk by trying to diffuse a volatile situation before leaving. The findings from this study support this and similarly found that workers' needs were secondary to that of conducting an

assessment. Therefore, the needs of the family, child and organisation were put above the safety of the worker.

Workers reported feeling distressed during incidents of verbal abuse or a client venting frustrations because in most cases the children were present. Workers commented that if they felt afraid during a visit, they speculated on the strength of fear that the children living in those homes must feel. The findings from this study and literature suggest two elements. Firstly, assessing risk to self and client causes a conflict of interest for staff. Secondly, in assessing risk and conducting appropriate protective work, the system used by staff can in itself increase risk. Beck notes that in some cases by being overly risk-adverse people can in fact create unnecessary risk.

With respect to Beck's risk society theory, individuals are responsible for risk assessments and the management of risk is dependent on those individuals completing assessments. Child protection workers are entrusted with the responsibility of keeping up-to-date records and reporting incidents of violence. Therefore staff are reliant on good multi-agency working, and communication is key to this. If there is a lack of communication, then workers can be left at risk. Likewise if staff do not report violence or update systems, they can inadvertently place colleagues at heightened risk. Regulatory frameworks often give the impressions of providing a form of safety which does not correspond to the working situation. Littlechild (2008) and Kemshall (2002) agree that policy and tick box documents in place to support procedures are asked to provide a level of safety which is unachievable. Workers have to make very quick decisions in stressful and emotive situations. Therefore it could be argued that risk assessments offer more protection for the organisation than the individual child protection worker.

According to Beck (1992) there are no prescribed ways for the public to approach risk. In a post-traditional society there are no traditional ties or expectations of how a person should behave and therefore this becomes a matter for the individual to consider and act upon. In practice, workers define how they practise and conduct themselves professionally with limited input from the organisation. This holds significant implications for training and regulation of risk to workers. Whilst policy and procedure are in place to guide professionals, workers are left to decide whether to challenge clients or not and to what degree this would increase risk to themselves or the child. It could be argued that this is a dangerous way to practise.

Workers stated that they take annual leave, TOIL (time owed in lieu) and lunch breaks to manage the personal impact of violence and abuse. Staff felt that workers could manage the emotional and physical impact of violence and abuse better if there was more time. In practice this would mean holding smaller caseloads, having time to reflect and engaging in more meaningful supervision. Staff felt that currently there was not adequate time, and workers felt this directly affected their capacity to build positive working relationships with clients. Not having enough time to build relationships could lead to miscommunication and as Beck writes, 'distrust' between social actor (client) and expert (child protection worker). Miscommunication and distrust would only accentuate the fractious relationships with clients already experienced by staff. Not having enough time to build relationships or reflect on the impact of violence and abusive incidents could lead to the provocation of violence and abuse in practice.

When building relationships with families, workers need to be aware of the power imbalance between professionals and client. Beck's concept of 'reflexive modernisation' (Beck, 1992) would suggest that the ideal would be a redistribution of power from institution back to social actor. In reality this does not happen even though social services claim to be working in partnership with clients. Child protection conferences and court appearances prove that where there is no distribution of power, or clients feel powerless, these scenarios can trigger violence and abuse.

As previously mentioned, staff reported that during home visits workers, would often stay to diffuse a potentially volatile domestic situation in an attempt to protect the children living in the home. Staff are therefore continuing to practise in an attempt to get the job done, regardless of risk. Workers reported that work pressures, caseloads and deadlines put pressure on them to perform and meet requirements, leaving their health and safety as a secondary concern. This study found that working with manipulative, elusive and challenging families means that workers are managing perpetrators on a daily basis. More support and training needs to be offered to child protection workers, so that the feelings and impact that are entwined with workplace violence and abuse can be better understood and managed.

### Risk and Luck

Workers in this study consistently spoke of feeling 'lucky' with respect to their personal experiences in practice; luck rather than judgment appeared to keep workers safe in



practice. Luck versus judgment will be explored in connection with literature that reports 'certain tasks carry greater risk' (Norris, 1990; Littlechild, 2003 and Broadhurst *et al*, 2004). If this statement is found to be proven then workers should be able to predict, assess and prevent risk in practice rather than relying on luck.

Beck believes that experts hold knowledge on risk and that this is then disseminated to non-experts, and Stanley and Goddard argued 'workers are traumatised by prior knowledge of criminal activity' (Stanley and Goddard, 2002). This knowledge informs an individual's actions to predict and prevent risk, how this leads workers to feel prepared in practice, and in other cases how prior knowledge evokes fear, intimidation and anxiety in staff will be explored. Risk and luck will also be examined with respect to Beck's concepts of risk distribution and the 'issue of risk'. Risk distribution is important to the understanding of luck in relation to risk.

#### *Prior Knowledge*

Prior knowledge of risk or a potentially violent or abusive client was noted by some workers in this study as fear-evoking and emotive. The idea of visiting a person who is known to be violent or abusive can perturb workers in the line of duty. Stanley and Goddard (2002) found that working with people who are known to be violent or criminal in their community traumatises workers. In many cases this also increased feelings of anxiety, intimidation and threat amongst respondents. The majority of workers changed their approach when working with known criminals. Perhaps the idea of luck is based on the following example in practice: the worker approaches a home visit with this reported feeling of 'fear', if the visit goes well or if the perpetrator is not abusive verbally or physically then the worker perceives themselves to be lucky. Thus this would mean that fear and luck are interlinked but furthermore that this feeling of luck is not statistically supported.

The literature review found that workers were less likely to be physically attacked if they were female, and in general physical attack was less likely than a verbal altercation or threat. The analysis is that it is not luck that keeps a worker safe; this finding reinforces that fear plays a significant part in workers' emotions and approach. In reality, as was found in this study (Chapters Six and Seven), this fear is unnecessary from a risk perspective as in the majority of cases the likelihood of actual physical violence is small. This study alongside current and relevant literature and Beck's risk

society theory has found that prior knowledge can have a negative effect on the worker psychologically and emotionally. This reported negative effect reinforces the fact that prior knowledge needs to be managed more effectively in practice. Where workers are supported, and procedure followed, the negative effects of prior knowledge are lessened. Stanley and Goddard found that where this was not the case, workers felt isolated.

Having identified the negative effects of prior knowledge, it is worth noting that this study found prior knowledge in some cases to have a positive effect, with workers reporting that prior knowledge helps them to prepare and plan more efficiently for home visits and meetings. It is important to mention that although such knowledge helped with preparation prior to meetings with clients thought to be violent or abusive, in many cases it still evoked an emotional response from workers.

Although Beck does not specifically write about social workers, his thesis supports the notion that prior knowledge is positive and believes that knowledge is essential to survival within the risk society. He argues that risks are related to human actions and decisions, therefore child protection workers are social actors who define how risks are experienced, assessed and managed. Literature (Norris, 1990; O' Hagan and Dillenburger, 1996; Weinger, 2001; Stanley and Goddard, 2002; Bowie, Fisher and Cooper, 2005; Trotter, 2006 and Waddington, Badger and Bull, 2006) argues that child protection systems can produce risk in the way procedure and policies inform practice. Beck's (1992) idea of the 'boomerang effect' would support that organisations can themselves create risk rather than diffuse it. Prior knowledge is therefore useful to plan and prepare, but only when the preparation and plans are disseminated effectively.

As was found with this study it is dependent on the individual worker as to how they manage individual situations and how they choose to process and act upon prior knowledge. Such assessment and management of risk is entwined with Beck's idea of biographies: workers are using the 'innate skill set' learnt in their personal life and then practising based on these values (Beck, 1992). A more effective way to avoid risk and manage prior knowledge would be to train staff on how to manage difficult or high-risk home visits and clients, which might then avert provocation of an already risky situation, allowing child protection workers to adopt effective evidence-based practice.

Beck (1992) argues that knowledge is essential to assessing, preventing and managing risk. As the above commentary demonstrates, in many cases prior knowledge can support staff to prepare and plan home visits and meetings. However, managers and organisations should show caution when relying on prior knowledge to alleviate fear or believe this to be a way to manage feelings of stress and anxiety. Literature and this study found that prior knowledge, although professionally helpful, still personally affects the worker.

### *Luck and Tasks*

This study found that workers felt lucky when they were not attacked or abused by clients. Where does this idea of luck stem from? With the idea of luck come notions of chance, gambling, fate, and fortune, meaning that events are incidental and unpredictable. If workers feel that their safety is down to luck and good fortune this could mean that they feel risk is unpredictable and therefore unmanageable in practice. This would relate to feelings of 'you never know', 'it could be me next', and 'there is always a chance'. Feeling that risk and incidents are a lottery and that being attacked or abused is based on your personal luck could provide the reason for the ever-present feeling of fear described by respondents and the literature (O' Hagan and Dillenburg, 1996; Stanley and Goddard, 2002; Littlechild, 2005; Trotter, 2006).

Beck affiliates this fear and anxiety with the potential for hazards to occur on such a scale that action after an attack would be futile (Beck, 1992). Beck writes that fear is not based on past experiences but on the unknown quantity of future events. This can be said to be true of the child protection workers' environment: to some extent workers are trying to predict the future, 'what if?' is always at the forefront of their work. However, child protection practice differs from Beck's notions, as workers use the past to evidence their concerns for the future in terms of completing risk assessments for children. Where Beck's (1992) arguments align with child protection work is in the assessment of risk for the worker; in the majority of cases workers are walking into the unknown with no family history or information prior to conducting home visits. Therefore, as Beck notes, the present is meaningless with respect to what could happen in the future. This to some extent aligns with the idea of luck. If workers are asked to predict future events without knowledge of the past or family history then are organisations going to provide staff with a crystal ball?

Currently there are twenty – two published studies on violence within social services. Of these twenty - two, only seven directly focus on the child protection worker, which is interesting considering that all literature highlights the potentially volatile aspects of the child protection workers role. Littlechild (2003) commented that there is little work published specifically examining violence and child protection work; since 2003 only four specific studies have been published three of which were written by Littlechild. Current and relevant literature dating back to the 1980s notes that child protection workers carry out tasks which place them at higher risk of being violently attacked or abused at work than the average professional. This is a point which is made but not developed in the twenty - two studies published. Studies attribute this 'higher risk' to child protection workers often being the conveyors of bad news, taking children into care, working with people under the influence of substances or alcohol and people who may be mentally disturbed (Breakwell, 1989; Norris, 1990; Bowie, 1996 and Broadhurst *et al*, 2004).

This study found that certain tasks carry greater risk for the worker. Workers reported these tasks to be child protection conferences, asking to see a child alone, home visits, core groups and attending court. Workers also felt that decisions made by management but fed back to the client by the worker were met with frustration from clients. Likewise managers overruling social workers' decisions or changing their minds caused tension and in some cases placed the worker at risk.

These findings challenge the idea that risk is unpredictable and based on luck. Beck (1992) believes risk to be unpredictable but also notes that although risk is not equally distributed; in certain scenarios risk can be disproportionate, and as with the scenarios above this can be seen within social services. It is clear that verbal abuse is experienced by all workers regardless of their role therefore verbal abuse can be seen to not be equally distributed. Physical violence and threats are disproportionately associated with qualified social workers who are carrying out tasks which carry more risk. Interviewees from this study reported all acts of physical attack related to the content and intention of the visit.

Luck appears to be the basis on which the majority of workers practice. Risk assessments are undertaken but even so, a worker's safety is still based on chance to some extent. Luck, therefore, is in all processes of child protection work, prior to assessment, during visits and in successfully completing visits without abuse or

violence. The feeling of luck and the notion of staying safe by chance thus leaves staff feeling insecure and fearful. The safety of workers needs to be based on the same level of assessment and evidence-based decisions as those made for the vulnerable children and families working with child protection services.

### *Theory of Luck*

In previous theory and literature violence and abuse have been theorised as unpredictable and disproportionate. The previous literature illustrates that violence and abuse are disproportionately experienced by child protection workers and reports that the specificity of incidents are unpredictable in nature. Beck (1992) has argued that when analysing risk, violence and abuse, the present is meaningless to the individual. According to Beck, (1992) in fact it is the future, and in turn the unknown, which are the catalysts to feelings of fear and insecurity. This study has aimed to better understand the impact of violence and abuse on the child protection worker. The study has found that the idea of luck within practice resonates amongst the majority of staff and that luck is the real impacting factor for workers on the frontline. This study has found that although it is a strongly held belief that certain tasks carry greater risks, that workers still have a sense of luck when they finish these tasks. Considering that this study supports the findings of current research and agrees that certain tasks carry greater risk, it is interesting then that luck rather than judgment is considered the greatest contributor to worker safety and personal impact.

This study offers a unique viewpoint from that of Beck and previous research. Beck believes that the present is meaningless when talking about risk, however, with a view to luck this would suggest that the present has meaning and that the future is not as noteworthy for individuals as Beck believes. This study suggests that it is not fear of the future but the feeling of luck in the present that drives individuals' feelings of fear and risk. This theory would provide a unique viewpoint and original understanding of violence and abuse in practice. It is therefore the suggestion of this thesis that the greatest impact for workers is not prior knowledge, certain duties and tasks or ineffective policy but rather workers perceptions of luck. This is not to say that in practice ineffective policy, certain tasks and prior knowledge are not all impacting factors for staff that need to be addressed. Rather, in the context of short-staffing, high workloads and ineffective policy, workers used the notion of 'luck' as a psychological crutch. It would appear from the findings that luck rather than assessment, knowledge,

judgement, support or management drives workers' feelings of fear, anxiety, insecurity and threat in practice.

Luck as theorised by this study demonstrates that 'luck' can be seen as a psychological crutch to keep child protection workers feeling positive when entering unknown situations and scenarios. To develop this it could also be argued that workers use of 'luck' could act as a way of acknowledging incidents of violence and abuse, without placing the blame with the agency, perpetrator or indeed themselves; that workers had taken a chance and their luck had just run out on that occasion. This could be linked to Beck's concept of individualisation and this study's argument that responsibility is often taken away from the agency because accountability can be found elsewhere, in this case accountability according to staff perceptions would be in the hands of fate. The idea of luck is complex and can be seen as a key impacting factor for staff, it can be argued that it is a psychological crutch for workers and a factor that is responsible for violence and abuse. However, luck is only one aspect with which the issue of violence and abuse in child protection work can be analysed. There are various other impacting factors (prior knowledge, ineffective policies, poor management, high caseloads and certain tasks carrying greater risk) which are more tangible, if these impacting factors were more effectively managed in practice than perhaps the notion of luck would cease to exist.

### *Prediction*

Beck (1992) argues that having knowledge in the risk society is vital. He believes that knowledge can lead to prediction, or at least a society which is better prepared when approaching high-risk situations. Bowie, Fisher and Cooper (2005) found that societal trends such as domestic-related homicide (which is on the increase), sexual assault, physical assault and stalking are spilling over into the workplace. Therefore, in relation to Beck and knowledge, if organisations were more aware of general crime trends, then an understanding of what child protection workers are facing in the community could be enhanced. This could then inform the content of training programmes and furthermore the procedures for supporting workers with practice realities. Weinger (2001) argues that one hundred per cent safety can never be achieved, however social care organisations can do more to reduce the risk to their staff. Perhaps a greater knowledge base would increase awareness and understanding, ultimately leading to a

better assessment of risks faced by workers. Furthermore this knowledge could lead to *a priori* prediction.

There were several contributory factors highlighted within the findings of this study which could aid in the prediction and prevention of risk. Namely, in the majority of cases (eighty-seven per cent), venting frustrations led to a client verbally attacking a worker. This finding can be generalised across the population to increase awareness. Managers need to be aware that when workers are exposed to clients venting verbal frustrations they need to risk-assess the possibility of the same or another worker being verbally abused or threatened in the future by the perpetrator.

Another factor that increased risk to worker and in turn the likelihood of being abused or attacked at work was working with convicted criminals. Findings showed that you are more likely to be threatened with physical harm or assault if you work with convicted criminals and that the same would occur with greater frequency. In ninety per cent of physical assaults the perpetrator was a convicted criminal, which corresponds to findings from the literature review (Stanley and Goddard, 2002). Denney (2009) describes how historically theorists have believed that you could tell if an individual was violent or criminal by the way they looked, class, race or gender. Working with convicted criminals therefore needs a more rigorous risk assessment to inform practice and prediction.

### Experience

This section will assess workers' experiences of violence and abuse in conjunction with previous studies. It will also assess the differences in reaction and experience of verbal and physical violence and their impact. Workers noted that clients who hold criminal convictions for violence increase anxiety and can lead to workers avoiding contact with these individuals. Lupton and Gillespie (1994) found that there was a gender difference in experience. The apparent gender difference in practice will be linked to Beck's (1992) idea of 'lifestyles' and 'biographies', for example, how the lifestyle of clients can increase risk and how worker biographies (background, gender, culture) can influence worker experience.

### *Form and Frequency*

This study found that there are two types of violence. There is 'actual physical violence' which includes, punching, kicking, slapping and stabbing, for example, acts where the worker is left with a physical injury. Secondly, there are 'acts of violence' where the worker is not physically harmed but has been physically blocked, held hostage, stalked or harassed. Separate to these is abuse: there are the overtly threatening and abusive verbal acts and then there are the non-verbal covert acts such as intimidating body language and the use of weapons. Literature disclosed several forms of violence from abuse, shouting, intimidation, physical attack and threats, matching the findings of this study.

Verbal abuse, whether personal or non-personal, was reported to be a daily occurrence and is the most common form of abuse. This study intentionally focused on verbal abuse as it was previously overlooked in literature. This was also found to be the case in practice, workers overlooked verbal abuse as 'the norm' and often only reported their 'worst experiences'. The different types of verbal abuse were separated so as to garner a statistical understanding as to the extent of verbal abuse and the affect this has on workers. It was found that whether the client was venting frustration or verbally attacking a worker, in the majority of cases this led to the worker experiencing negative feelings.

Brown, Bute and Ford (1986) found that a significant number of workers were being threatened and a large proportion of these workers (thirty per cent) had been threatened more than once within a three-year period. This study found that the majority of workers were being intimidated and threatened on a weekly basis. It was also found that workers were not always overtly threatened but in some cases clients used threatening body language or subtle messages, leaving the worker with little doubt that they were being threatened. Stanley and Goddard (2002) found a considerable difference in the number of threats made and actual assaults; this was further supported by Newhill's study in 2004.

Ninety-one per cent of respondents in Broadhurst, Hawkins and Briggs' (2004) study had experienced intimidating behaviour. Conversely, this study found one in two workers had been directly threatened with physical assault or harm, thus demonstrating that intimidation is both frequent and experienced by the majority of workers; however,



threats of actual assault are less likely to happen. Yet there are still a large proportion of social workers who experience a personal and professional impact as a result of threatening and intimidating behaviour. In all cases verbal abuse and intimidation are seen as the most frequently experienced forms of abuse, however, they are also the least recognised by the organisation.

As opposed to the more regular event of verbal abuse or threats it was found that physical forms of violence were a monthly or infrequent occurrence. One in ten workers had been physically attacked at work. This statistic is low with reflection to the findings of other studies (Breakwell, 1989 and Broadhurst *et al*, 2004) who found that one in four workers were being physically attacked, or twenty-four per cent. Norris (1990) reported that thirty-two per cent of respondents to his study had experienced actual bodily harm. Trotter (2006) found that three per cent of workers had been shot at (in America) and in Australia thirty-one per cent of welfare workers had been physically assaulted, which correlates to the findings of previous research.

Pahl (1999) found in a quarter of cases, relatives of the service user were the perpetrators of violence. In this study, a report from a worker who had been punched in the face noted that the perpetrator was the child's uncle. There could be an argument that relatives of families being assessed need to form part of the risk assessment and undergo police checks. These statistics provide an overview of the likelihood of being affected.

### *Gender*

There is a difference in gender experiences according to the findings of this study and literature. According to Beck (1992), lifestyles affect how a person manages risk, and as the social ties from a traditional society are loosened, lifestyles and individual life choices are determined by the individual. Thus generic lifestyle choices and views have changed. For example, more women are now focusing on careers and working full-time. As a result, more females are experiencing workplace risk in society. In the twenty-first century social work is a predominantly female profession. Unsurprisingly, literature documents a difference in gender experiences in practice. This somewhat challenges Beck's view of a post-traditional society as literature is reporting traditional perceptions: men are more likely to be physically attacked than their female

counterparts (Brown, Bute and Ford, 1986; Lupton and Gillespie, 1994; Bowie, 1996; Pahl, 1999; Littlechild, 2003; Littlechild, 2005; and Waddington *et al*, 2006).

However, this study found that there was only a one per cent difference in gender experiences of actual physical violence, which differs from previous statistics. Does this suggest an increase in female experiences? Or a shift in the post-traditional society that Beck illustrates? This study did, however, find that women are more likely to be sexually harassed, verbally abused and threatened, thus reinforcing the traditional stereotype of women as victims of violence that Beck believes no longer exist. With this minimal difference in gender experiences and Beck's argument that the post-traditional society is a question of lifestyles, this thesis argues that violence and abuse in practice are a result of systems, environment and circumstance rather than the individual. This argument will be used later to make recommendations for experts to better understand violence and abuse, and their cause and effect.

#### *Criminal/Client*

In 2001, Kemshall found that approximately ninety per cent of assaults on staff were by people who were known to social services and had a history of violence and abuse. To date, twelve social workers have been murdered in the line of duty. This could shed light on a proportion of the client base with which social workers are trying to engage on a daily basis. Criminal convictions spanned from shoplifting to GBH (grievous bodily harm), and included clients who had murdered their spouse.

Kemshall (2002) argues that when working with current risk assessment tools and individuals with historic negative behaviours that caution needs to be taken. She states that there is a risk of either assessing a false positive or false negative reading. For example, if anxiety amongst staff was high due to a client holding a criminal conviction more caution than necessary may be taken or due to the precautions taken this may infuriate the situation further, when in actual fact the risks were lower than assessed.

Beck's risk society theory (1992) illustrates that society is now based on risk rather than class and therefore the probability of exposure to risk is based on social, economic and geographical circumstance. Therefore, a society defined by substance misuse, and increased use of knives and handguns, is associated with risk and a surge in frequency and severity of assaults. There is a link between societal risks and

workers in this study reporting that, dependent on the client, their approach would change, feelings of fear or anxiety would increase, and the emotional impact would be greater. This correlates to findings from this study, that clients with a criminal history are more likely to abuse, intimidate, threaten and physically attack workers.

Prior knowledge of working with convicted criminals who held a conviction for violence against others increased workers' feelings of stress, anxiety and intimidation. Workers felt that these clients had already physically harmed another human being, prison was not a deterrent for these clients and this increased their fear. In several cases workers stated that they avoided these clients and would try and communicate with them in writing or over the phone rather than in person. It is important to note that seventy-seven per cent of respondents were working with at least one convicted criminal. Therefore, literature and findings would suggest that their experience in practice would be abusive and potentially violent.

### Resilience

In this study, workers reported that their personal backgrounds meant they were resilient in practice as they had already experienced personal struggles. The word resilience was used by the majority of workers. Literature suggests that students and newly qualified workers are most vulnerable to violence and abuse (Weinger, 2001). This is a notion that is accepted amongst staff and supported with Beck's ideas on 'experts'. Workers discussed the personal coping strategies employed in an attempt to lessen the impact of abuse and violence experienced on the frontline. This will be analysed alongside research which suggests that 'verbal and emotional abuse is minimised' (Lupton and Gillespie, 1996). During the interviews respondents were aware where they had minimised and highlighted these as an example of how 'violence and abuse are accepted'.

With resilience come ideas of vulnerability. It has been argued by Furedi (2008) that to be resilient you must first be vulnerable. Unlike the respondents in this study Furedi also believes that resilience cannot be taught because resilience is the "ability to bounce back from a disruption and cope with dramatically desperate events, circumstances that are unexpected and therefore new" (Furedi, 2008: 655). Furedi's ideas link to those of Beck and the risk society, he writes that rather than seeing technology and innovation as useful resources they are seen to increase risk in a

society fuelled by vulnerability and fear. Furedi highlights the 'possibilistic thinking' of society which links to the central question 'what can possibly go wrong?', which is frequently asked within child protection teams. As opposed to those arguments raised by Furedi, the participants in this study felt that resilience was a positive characteristic and a necessary attribute to 'surviving' social work.

### *Background/Career History*

Workers in this study attributed their resilience and skill set to their early career. Being placed in a 'good team' with experienced workers who respondents had shadowed during their placement was found to be the source of all workers' skill sets. Literature suggests that newly qualified social workers are more likely to experience violence and abuse. This study found that statistically, newly qualified social workers (twenty-six per cent) and workers practicing for ten years + (thirty per cent) are more likely to experience all variations of violence and abuse. Although a workers' career did not mean that they were more or less likely to experience attack, it did mean that workers felt they had acquired the necessary skills to 'survive social work'.

Some workers felt that they had learnt to cope with life and became resilient as a result of personal experiences. Some workers came from backgrounds where they had experienced domestic violence, witnessed substance or alcohol addiction and dealt with the loss of a loved one. There was a belief amongst respondents in this study that resilience and the skill set needed as a social worker were innate and could not be taught. There was an image of the 'social worker' held by participants and furthermore the idea that some people did not fit this mould. This idea has not been developed in previous studies but is an interesting notion.

Beck believes this construct previously would have been prescribed by society whereas in the risk society social actors are open to produce and shape their own biographies. As these biographies are therefore self-reflexive in nature, this could mean that biographies can be taught, and therefore all workers could be trained to a similar level as long as they individually own and sign up to the values and lessons taught. Life opportunities which once were fundamentally closed to decision-making are decreasing, thus an individual's biography is open to being personally constructed. Also of note is that biographies continue to be shaped, which is important when considering newly qualified social workers but also those workers who have been

practising for ten or more years. If workers' biographies continue to be shaped, workers are continually learning and thus need constant support and training.

### *Managing the Impact of Violence and Abuse*

There were several ways in which workers noted that they managed the impact of violence and abuse. These stemmed from activities the workers actually did and those activities that they felt would help but had no time or support to do. Many workers were using informal networks to manage the impact of workplace violence and abuse. Beck sees that risk is present in everyday experiences of work, friendship and the lived environment. Consequently, in reflexive modernity individuals assume greater responsibility for the consequences of their choices and actions.

As a result, workers are not only managing workplace violence and abuse but will more than likely be coping with running a home, paying bills, looking after their family and trying to maintain friendships. Several workers stated that the stress, fatigue and general impact of being a child protection worker meant that they had lost friendships, family and partners. Beck notes that previously secure sites of solidarity recede, support networks dissolve and individuals are encouraged to turn inwards toward personal decisions and self resources. This was the case where either workers had used informal support networks as a coping strategy but felt they were not understood or did not have the energy to see friends and family.

In using personal resources workers noted that they would use exercise to de-stress or as an outlet. Workers gave examples of riding a bike to work, walking, going for a run, boxing, Pilates and meditation in an attempt to 'stay sane'. Again, this is an area that was not covered in previous literature. Workers reported that if they did not exercise they would not survive the stresses and strains of social work. Workers also noted unhealthy ways in which they dealt with the impact, reporting over or under-eating and drinking over the recommended amount of alcohol. Many workers complained of being overweight or suffering from ill health due to the incessant violence and abuse suffered in the line of duty.

Time owed in lieu and annual leave were discussed as two ways in which workers felt they could manage the impact of violence and abuse. By taking some time off, staff would have time to reflect, catch up on sleep and rest. Participants reported that in

reality there is no time to take TOIL (time owed in lieu) or annual leave; in some cases workers would book annual leave and then either cancel it or take work with them, which they felt defeated the object.

### *Minimising*

Lupton and Gillespie (1994) found that staff's experiences of sexual, emotional and verbal abuse are being minimised and raised the apparent lack of understanding amongst authors who are only recognising extreme physical violence against social workers. Verbal abuse is also being minimised in practice. Workers are not recognising verbal attacks as abuse or worthy of note and as such are just 'getting on', minimising and accepting abuse in practice. Verbal abuse is not being considered as violence or abuse and it would appear from statistics that experienced workers are desensitised to abuse and its various forms. During the interview process there was a striking lack of emotional response from participants who were describing some horrific and traumatising work-life events. Furthermore, workers are not recognising different types of physical violence. Workers are accepting violence and abuse as a professional that they would not accept in their personal lives.

### **The Team**

The 'team' emerged as a fundamental factor in firstly coping with practice realities and as the main source of support for workers. The following section explores how support and management affect violence and abuse in practice. It will also examine how management and the team environment can minimise the effects of violence and abuse on case management, decision-making and the worker. Conversely this examination will consider the affects of poor management and workers using informal support networks rather than professional procedures. Since the 1980s, literature has reported the importance of workers feeling supported in practice and that feelings of isolation affect professional approach. Beck too believes that management at a macro and micro level is required if society is to manage 'the fleet of risks present in everyday life'.

### Managers

Every individual experiences certain types of behaviour differently. One person may view a situation as violent and threatening, whereas a colleague may not. It is

important that the threatened person, who has been victimised, is allowed the reality of their personal perceptions (Gill, Bowie and Fisher, 1999). Workers reported that managers were imperative to the implementation of policy and procedure and also in the support of staff. Many workers recounted positive experiences within teams where they felt they had a proactive manager. Managers who gave regular supervision, acknowledged the impact of violence and abuse and offered support to staff were vital. Relevant research findings and the findings of this study will be analysed to understand the role of management in supporting staff. Staff need to feel and be supported (Johnson, 1988 and Breakwell, 1989). The response from the agency in the aftermath of an incident played a significant role in the management of feelings, prevention and support.

### *Proactive*

In his 2002 study, Littlechild noted the importance of the role of managers and agency support systems in dealing with such matters as violence and abuse. His literature review found that workers needed to feel supported by managers and be provided with effective supervision. Beck would agree that child protection workers must be offered supervision as part of their ongoing role as risk assessor, protectors and conveyors of bad news. This study found that managers played a vital role in the delivery of procedures and ensuring that policy was proactively followed. Workers would describe proactive managers as those that keep their phones on, support joint working, are approachable and empathetic, and take risk assessment seriously. Proactive managers were said to be essential members of the team and where this was the case, workers felt safe and secure in practice. Using the 'proactive manager' as a template, recommendations which can be replicated across all child protection teams will be made in the concluding chapter of this study.

### *Neglectful*

Beck writes that currently organisational response and provision are inadequate and do not support a society where risks are not limited in time or space, and especially where risk can be catastrophic. The same can be said of social services and furthermore of managers who are employed to ensure policy and procedure are followed. Literature found that workers did not feel supported by management, that managers lacked understanding of violence, abuse and their impact, and furthermore that this made

workers feel isolated in practice (Johnson, 1988; Breakwell, 1989; Lupton and Gillespie, 1994; Pahl, 1999; Stanley and Goddard, 2002; Littlechild, 2003; Littlechild, 2005 and Trotter, 2006). Managers who were neglectful were described as not ensuring staff safety and wellbeing; these managers would not follow and in some cases were unaware of procedure.

Where staff in this study felt they had neglectful managers, twenty per cent did not know how to access professional support prior to or after a violent or abusive incident. Acceptance amongst staff and managers can lead to risk and in itself create risk through staff and management being complacent. Research demonstrates that verbal abuse and threats usually predicate actual physical violence (Lupton and Gillespie, 1994). If this is the case and managers are neglectful, and therefore unaware of what is happening on the frontline, then they cannot effectively assess risk to their workers.

Concerns were also expressed regarding home visits and risk. Prior to home visits, if risks were highlighted in some cases workers would still be expected to visit alone. This study found that the majority of workers do not feel protected in practice, often stating that they did not have any support after their personal experiences of violence.

### *Dependent*

Staff and their safety are dependent on managers. Managers are key to policy and procedure being effective in practice. Beck believes that knowledge is crucial within the risk society; therefore staff are dependent on managers who have knowledge about risk and the procedures that need to be followed. Workers felt that in practice managers and the organisation were not taking risk seriously and therefore sending messages to staff that violence and abuse should be tolerated and accepted as part of the job. Staff are reliant on the organisation and managers to support them in the face of adversity but also to send messages to their client group that violence and abuse toward child protection workers will not be tolerated. In some cases, manager's involvement and decision-making can cause conflict. It can also leave the worker feeling that they have no autonomy. There is clearly a fine balance between being excessively proactive and neglectful, especially in an environment where the worker's wellbeing is dependent on managers and systems.



## Support

Alongside a supportive and understanding manager, workers reported that 'team spirit' and collegial relationships were important. These were especially significant where workers were poorly managed. Workers described that informal support networks were where they found solace and furthermore used these to keep themselves safe. Where procedures were not enforced by managers, workers would form their own buddy systems and informal support networks, in some cases using family and friends to 'offload'. This will be looked at alongside the 'risk society': communicating with others in a similar position helps manage risk but can also lend to maintaining the hysteria and hype surrounding perceived risk. As can be seen in the statistics, there is a difference in how many threats are made and actual physical violence.

### *Informal*

In this study, workers reported using informal support networks as a coping strategy but also as a tool to assess risk and protect themselves in practice. This is an area which has not been examined in previous studies. Although literature has highlighted the lack of professional support, it has not illustrated the effect of this or where staff are getting support from. Workers reported setting up informal 'buddy systems' with colleagues whom they were close to. These 'buddy systems' would then be used to ensure safety. For example, the 'buddies' would call each other at the end of the day to make sure both arrived home safely. These systems were mainly used by workers who could not rely on their managers to have their phones switched on or to know where their staff were. Staff also noted that they used these 'buddy systems' as an informal way to offload and this was said to help them cope better. In building these close collegial relationships, colleagues were more open to joint working and helping each other out, even during busy periods. According to Beck, the change in traditional forces means that workers have to deal with risk as an individual instead of a collective, leaving them open to the possibility of increased personal risk. Here we see that although organisations are asking staff to manage risk more independently, as a reaction to this, staff build informal networks to cope with and manage risks. These support networks were described as invaluable and vital to surviving social work.

### *Formal*

Stanley and Goddard (2002) notes that currently little attention is being paid to workers' feelings of lack of support and isolation, which was also the case in the 1990s as reported by Lupton and Gillespie (1994) and Pahl (1999). The methods currently employed by councils to support staff in practice would reflect this point further. Currently, if a member of staff is verbally or physically attacked at work they are offered over the phone counselling, but firstly they have to seek this out and then self-refer to the service. Many staff members interviewed were unaware of this service. In these cases staff members were left with no formal support in the aftermath of a violent or abusive incident.

If staff were the victims of a violent or abusive incident there are incident reports and procedures on how to report such an experience. Again staff were unaware of correct procedures; one participant was told to note an incident down in the accident book, which is also used for slips and spills in the office. None of the respondents had used the correct procedures to formally acknowledge an incident. Workers are able to take TOIL, lunch breaks and annual leave, all of which should give staff a break from work and a chance to reflect. Workers interviewed did not have time to claim TOIL, often cancelled annual leave and rarely took a lunch break. This would reflect the findings of Stanley and Goddard (2002) who stated that workers' needs were not met or supported.

Gill, Bowie and Fisher (1999) wrote that it is important for the victimised person to feel understood and for their support to be tailored to their personal needs and perceptions. Does a telephone counselling service meet a person's individual need? It was reported that staff did not feel telephone counselling to be supportive in any way. Littlechild (2005) found that staff preferred to discuss stressful situations or incidents with line managers in supervision rather than use the local authorities counselling service. A framework for firstly understanding violence and abuse needs to be established, followed by a creative set of supportive tools which all staff are aware of. As with the risk society, whilst encouraging individual participation, this framework would allow social institutions the freedom to characterise and assess risk. Individuals will only participate once the institution has proactively characterised the problem.

## *Communication*

The risk society denotes a difference between social actor, and experts which can be seen in the difference between child protection worker and directors of service. Communication between the two parties is seen as vital within the risk society, according to Beck. How then can social services reflect this in practice? How can communication be improved so as actor and expert can support one another? Supervision is a tool with which to report thoughts, feelings, case management and incidents. Currently this tool is not being used effectively in practice and furthermore, once supervision is over this information in many cases is not being shared outside of the manager–worker forum. For issues to change within the organisation, a more open form of communication must be reached. To do this, some changes on the frontline need to take place, for example, a review of worker caseloads. In this study it was noted that over fifty per cent of respondents were carrying above the recommended caseload. This directly impacted on what was discussed during supervision and how much time workers had to offload and complete incident forms. The lack of resources was highlighted in previous research, however, points regarding actual caseload have not been linked to lack of reporting, time management or risk.

There needs to be a better dissemination of knowledge (including risk, policy, procedure) from the directorate down to their social work staff. There was a significant number of staff (twenty-five per cent) who did not know how to report or access support for themselves after an incident. Messages about tools and procedures need to be readily available and by doing so organisations create a zero-tolerance culture. Perhaps before addressing the issue of violence and abuse, a more effective level of communication between worker and client needs to be reached.

## Affect, Approach and Decision Making

In many cases workers stated that violence and abuse had a direct affect on the child protection case. Broadhurst, Hawkins and Briggs (2004) found that the child's needs are secondary to those of appeasing violent or abusive parents. Interviewees admitted that where a client is known to be violent or abusive they would avoid a client, conduct home visits at the office and ask a colleague to co-work a case. They also noted in some cases their experiences of violence or abuse would directly affect their decision-making.

In several cases, examples were given where a client was abusive or violent, leading to a client successfully manipulating proceedings as the worker was changed in an attempt to appease the perpetrator. In many cases these decisions were made by management. This practice will be analysed with reflection on Beck's idea on the prediction of risk in an attempt to generate ideas on how to manage the affect of violence and abuse on a case.

### *Professional Impact*

It was reported by Broadhurst *et al* (2004) that the child's needs were secondary to those of appeasing the violent or abusive parent. There is a significant professional impact which is well-documented in literature, the media and serious case reviews. In some cases the social workers' safety is put above that of protecting the child; for example, this study found that fifty-four per cent of workers would not conduct home visits if they felt at risk from family members. In other cases workers would put themselves at risk to ensure a potential incident was diffused before leaving a home visit. There is clearly a tension created in trying to balance the care versus control dilemma that workers face on a daily basis. For many families, children's social care is an unwelcome intrusion into their lives and as such they meet this with frustration and resistance. Social services are there to care for the community but also have a controlling role where assessing risk to the child, in some instances having to use this control to make life-changing decisions for families, for example, permanently removing a child.

Workers are therefore reported to have an empathetic response to the clients that they work with. In some cases this means that workers overcompensate and collude with clients, often applying the 'rule of optimism' (Dingwall, 1983). This leads to workers not challenging clients where needs be, closing cases as staff feel their intervention is 'abusive' or allowing themselves to be manipulated by clients. Therefore, by being violent or abusive the perpetrators manage to remove social services from their lives. If workers do not understand violence, abuse and their impact this could happen at the cost of a child's life. There have been several well-documented cases of this in the media, for example, the case of Victoria Climbié. As mentioned previously, a client venting frustrations is enough to cause anxiety and stress within the professional. Littlechild (2002) found that as a result, worker effectiveness can be compromised, once again reiterating the depth of professional impact on service delivery.

## *Case Management*

The impact of violence and abuse means that cases are managed differently. This finding agrees to some extent with Littlechild's (2005) finding that violence and abuse has an effect on interventions and worker effectiveness in practice. Workers in this study admitted to making different decisions and approaching cases in a different manner. Workers in this study noted that it was easier not to challenge clients who were known to be abusive. In many cases workers would wait until they were back in the office to confront clients. In some cases those workers interviewed stated they would attempt to joint work these visits so that they can manage difficult conversations, but this is a minority approach. In some cases workers avoid contact, home visits and indeed any contact with the perpetrator, communicating only by letter. In cases where child protection workers avoid clients, halting the progress with the case, deadlines are not met and children are not seen alone. It is not necessarily an abusive or violent issue that means workers avoid clients but also the prior knowledge that clients have a criminal conviction or a history of violence.

In contrast to the figure of fifty-four per cent of workers avoiding home visits (regardless of whether the client was a criminal or not), they would do so in only twelve per cent of cases where the client was not a convicted criminal.

Knowing that certain activities increase risk should lead to appropriate recognition and thus more careful management by both the worker and the agency, so that workers are protected and families are appropriately approached and challenged where necessary. According to the findings from this study, currently this is not happening in practice.

Workers also reported that violence and abuse affects their decision-making, although many were reluctant to report this. Stanley and Goddard (2002) claimed that as a result of 'hostage theory' some children who are under the care of children's social care are not adequately protected and continue to experience abuse. This correlates with Broadhurst *et al* (2004) stating that in some cases the child's safety was given low priority. Beck writes that risk depends on decisions. Decisions arise from the transformation of uncertainty and hazards into action. Workers stated that they used supervision as a tool to manage decision-making and that where the manager was proactive and they felt supported, decisions were not affected. Equally, decisions were

changed due to a parent's actions. A client's mistreatment of a worker would make them question the perpetrator's role as a parent.

Therefore, with respect to decision-making, if a worker claims that they 'hold back' when approaching clients, what does this mean in terms of making decisions? Fewer workers admitted that violence or abuse would ultimately affect their decisions; however, if workers are fearful of delivering bad or challenging news then would they make more 'agreeable' decisions or write overly-optimistic reports so as not to 'upset' or 'antagonise' a potentially violent client? It could be argued that decision-making and approach are managed in supervision, but not for those workers whose supervision is ineffective or non-existent. Many workers reported feeling unable to be truly open and honest about their personal feelings with supervisors, therefore this issue may not be being managed in practice.

### *Tools*

There are several tools used within practice to manage violence and abuse (see appendix 6 and 7). These are currently seen to be ineffective according to the workers interviewed for this study. It is reported in literature that the tools currently used to lessen the impact are useless and workers are expected to continue to practise regardless of threat or risk (Weinger, 2001). Can we therefore learn from Beck's theory of the risk society and his idea about the prediction of risk in an attempt to stop violence and abuse influencing case management? Currently risk assessments, incident reports and multi-agency working are employed in an attempt to assess, report and communicate risks. Littlechild (2008) would argue that these are insufficient for the task and that worker safety should not be solely reliant on current risk assessment tools. The risk epoch imposes on each of us the burden of making decisions which may affect our very survival without any proper foundation in knowledge (Beck, 1992). With the above methods, child protection workers are reliant on others for knowledge. Clearly, a lack of knowledge of the tools in place to aid and support workers has a direct affect on the approach and decisions made by workers in practice.

### **Organisational Culture**

Social workers described an organisational culture which accepted and tolerated violence through its inactivity in supporting workers, and its underlying messages in

policies that do not proactively assess or prevent risk. This section examines how the organisation manages the affects of violence and abuse in practice. According to Beck the organisation is responsible for the characterisation of risk. This is reflected in current legislation which places an emphasis on employers to proactively assess, manage and review risk to staff. Relevant literature and findings from this study found this not to be the case in practice and in several instances organisational systems are seen to be the trigger for violent and abusive incidents.

These points will be examined to assess what can be done to change current systems to ensure they work more effectively in practice. Culture, will be examined alongside the finding that underreporting is prevalent. The effectiveness of the Lone Working Policy and current procedures will be considered, concluding this chapter.

### Culture

Beck suggests that workers' understanding of risk is generated by the organisation. All workers interviewed accepted that violence and abuse are 'part of the job'. This appears to be inherent in the organisational culture. Policy and procedure send underlying messages that workers' safety is secondary to that of the child. Where policy and procedure are not followed, workers are put at risk.

Workers felt that where violence or abuse had happened, their professional capabilities were questioned. Workers stated that the negative image of social work generated by the media, and social services as an organisation, could in some cases trigger violent or abusive incidents. Managers and practitioners need to challenge current assumptions and increase their knowledge of violence and abuse (Gill, Bowie and Fisher, 1999).

### *Organisation*

The underlying messages that organisations are sending to their employees through ineffective policies and procedure has created a culture where violence and abuse are tolerated, accepted and minimised. Furthermore, the organisational approach to violence and abuse can in itself be abusive, and in turn the procedures used by staff can trigger a violent and abusive episode.

According to Breakwell (1989), organisational culture and systems can sometimes invite risk, which was also found in the qualitative element of this study. Breakwell's (1989) study firstly outlines what it is in professionals that may invite others to be violent and then introduces ways that workers can avoid this and approach emotive situations without inviting unnecessary risk. This is a key point; researchers from the 1980s have published literature on how to prevent and diffuse potentially violent episodes, yet organisations still apply the same rigid procedures. Weinger (2001) writes that organisations have been reluctant to address and implement more effective safety procedures. This is reflected in several studies, as authors believe that there are accepted 'norms' within practice, one of these being a tolerable level of aggression and agitation. These are said to be accepted by the organisation as an inevitable part of the job (Johnson, 1988; Breakwell, 1989; Norris, 1990; Lupton and Gillespie, 1994; Pahl, 1999; Gill, Bowie and Fisher, 1999; Weinger, 2001; Stanley and Goddard, 2002; Littlechild, 2002; Littlechild, 2003; Littlechild, 2005; Bowie, Fisher and Cooper, 2005; Trotter, 2006 and Waddington, Badger and Ball, 2006).

Beck's idea of a 'reflexive modernisation' confronts and accommodates the tendency of organisations to neutralise the institutional and cultural productions of risk. The child protection workers interviewed in this study were in the majority (seventy-seven per cent) managing more than the recommended caseload. This was accepted and 'neutralised' by the organisation as workers are expected to 'get on with it'. Organisations state that there is a lack of resources and money, providing this as the reason for the status quo of being overworked and underpaid. Equally, organisations accept that there is a tolerable level of aggression and violence, implying 'that is just the way it is'. This culture affected practice in different ways, namely the acceptance and toleration of violence, and secondly that systems were triggering abusive incidents.

Bowie, Fisher and Cooper (2005) found that the organisational climate has a major influence on the ability of employees to cope with violence. Therefore, the systems in place to support staff play a vital role in a worker's wellbeing and feeling of security. This study found that in some cases workers were not aware of the systems in place to support them, and where the workers were aware they did not have faith in these systems. Beck's idea of risk also examines the effects of institutional change on social experience: in this case social service agencies have moved from a needs-led institution to a preventative risk-assessing organisation. This has affected the culture



and systems, which now cause workers to feel anxious, fearful and insecure. O' Hagan and Dillenburg (1996) believe that moving from a needs-led to a risk assessing system has left both the worker and client being abused. Staff should be supported with this change and should be made aware of the systems in place so that they can practise feeling safe and in turn offer an invaluable service to clients. This is not the case according to respondents from this study. Staff are reportedly not informed of their role as risk assessor during induction or as part of a mandatory training programme. It could be argued that this apparent lack of education and information again relates to large caseloads and time management issues.

The messages sent out by the organisation are unclear. Workers reported that the first item addressed at an initial visit is to provide the client with a form detailing how they can complain about their social worker. By handing this document to the client as the first stage to building a relationship it sends a message that 'you [client] will need to complain', but also suggests that only the worker has expectations to live up to. In no way do organisations currently set out expectations of their clients or make it clear that abuse toward staff will not be tolerated. There were several examples given by staff, of other agencies, that send clear messages to people utilising services, for example, the NHS (Full Stop campaign) and housing departments (zero-tolerance). A lack of similar messages from children's social care not only sends the wrong message to the client but also reinforces workers' beliefs that their needs and safety are secondary to those of the perpetrator of violence and abuse. This finding reiterates Lupton and Gillespie's (1994) recommendation that violence and abuse need to be recognised by the organisation and, furthermore, acknowledged through training, induction, supervision and support.

These messages would in several cases mean that violence and abuse were minimised and 'excused' even where clients were making serious threats towards workers or physically attacking them. The organisation define in their policies and procedures what messages they send out about violence and abuse, but currently these 'messages' lead staff to believe that it should be accepted and tolerated and as such not reported. By not having stringent boundaries or consequences in place, workers feel that organisations are allowing violence and abuse to simply 'happen'.

#### *Worker Capability*

Questions of workers' capabilities are at the forefront of any discussion regarding violent and abusive incidents. Are workers suited to social work? Are they the right 'type' of person? These questions came from management and from workers questioning their own ability. Workers often questioned whether they had caused the incident and wondered what they could have done differently, often leading to a worker feeling vulnerable and lacking confidence. During the interview process managers openly shared views that in some cases a worker's approach was to blame for the violence or abuse experienced. This led to workers reporting that managers questioned staff during supervision as to 'what they had done wrong'. Workers also felt that by changing the social worker during proceedings, as was the case in many scenarios, their professional integrity was undermined.

Workers in this study stated that they did not sign up to be a social worker only to then be abused by the people they were trying to help. Many felt that the reality of social work was a far cry from what they had trained to do, for example, to help people. Weinger (2001) found this also, noting as well that newly qualified social workers and students are more likely to experience violence and abuse. Managers from this study would attribute this to workers 'needing to be a certain type of person to do this job', providing yet another example of an organisational culture that blames and questions instead of supports, a culture that demands workers cope with little to no security or respect for their safety. This culture and managerial style leads workers to feel as though they are 'confessing' or 'admitting professional failure' when they discuss feelings of pressure, stress, anxiety or intimidation.

### *Image*

Violence and abuse are therefore accepted as part of the job by the organisation and tolerated within social work departments. According to the managers interviewed by Littlechild violence and aggression are seen as a feature of the job (Littlechild, 2003). There is a negative image of social workers which potentially leads to society to believe that it is acceptable to be verbally abusive or physically violent toward a social worker. The media regularly report negative stories which fuel this societal belief, for example, 'child-snatching social workers' or stories of the 'neglectful social worker'. Some workers suggested that these negative media portrayals caused a public lack of respect and were a trigger to violence and abuse.

## Reporting

Although ninety-nine per cent of workers stated they would report a violent incident, only forty-five per cent would report to management. This finding is supported by current and relevant literature. Norris (1990) found that there was a difference in reporting between male and female workers, which is also supported in this study, and it was found that females would report to informal support networks whilst men would report to their managers. Actual physical violence is more likely to be reported (Littlechild, 2003; Newhill, 2004 and Littlechild, 2005), the interviews and questionnaires found that informal support networks were frequently used to report, this was developed in the semi-structured interviews where respondents stated that they would not report verbal abuse, threats or physical intimidation.

## *Underreporting*

Current literature found that there was significant of violent and abusive incidents (Rowett, 1986; Norris, 1990; Bowie, 1996 and Littlechild 2003). The study replicated this finding but furthermore found that verbal abuse was not reported in any case and was not recognised as a form of abuse worthy of consideration. Norris (1990) suggests that a lack of reporting and understanding of what violence and abuse is had a direct impact on the quality of work. Norris (1990) believed that when a worker reports violence or abuse in turn reporting a perpetrator that others find fault with the victim, believing them to be incompetent. It is not surprising then that within this study workers felt that their professional integrity would be scrutinised and therefore there was 'no way' that they would 'admit' that they 'could not cope'. It is difficult to pass judgment or to blame organisations for ineffective policies when social workers are not reporting incidents. If reports of incidents increased then it would make assessing risk easier and in turn lead to the prediction and prevention of incidents.

Not all workers in the sample group for this study knew how to access professional support. This may have led to a lack of reporting as workers were unaware of how to and who to report to. This also highlights a disparity in those respondents who said they did report. Did they use the correct procedures? There is also the question of workers recognising what violence and abuse in practice looks like. This could contribute to the problem of underreporting. This study has found that staff were not always aware that an incident was violent or abusive. When asked whether they had

experienced physical violence in the last two years only five participants answered 'yes'. Yet when the questions became more prescriptive there were seventy-two incidents reported. Underreporting was highlighted in previous literature but what was underreported has not been examined in the relevant literature reviewed. This finding highlights underreporting, minimisation and a lack of understanding amongst practitioners. Crucially, when looking at the feelings evoked by such experiences, it does not appear that a lack of understanding as to what constitutes violence or abuse exists. All workers reported negative feelings as a result of their experiences, indicating a level of understanding, therefore it can be suggested that culture directly affects reporting.

### *Reporting Processes*

When examining reporting processes this study found that workers were not using formal reporting processes. Of the sample group, ninety-nine per cent of workers stated that they would report violence or abuse, but when questioned further, it was revealed that only forty-four per cent would report to their line manager. This highlights underreporting but also demonstrates that the forty-four per cent who are reporting to line managers are not completing incident report forms, which is the correct procedure to follow. The other fifty-five per cent of workers who did not report to managers were using informal support networks such as friends, family, spouses or colleagues. Littlechild (2005) noted that findings from his studied highlighted that councils were not keeping appropriate records of violence and abuse toward staff. This means that risk assessments are not being updated and staff are not making case notes so as to ensure the safety of their colleagues. In only four examples would the worker report 'physical violence to the Police'. Staff should be encouraged to report crimes to the Police, yet in a few examples given during the interview process it would appear that staff are discouraged from doing so.

The majority of workers were unaware of the correct procedures for reporting which could rationalise the reason for underreporting. Managers should be raising awareness amongst staff of the correct procedures and encouraging them to follow these through. Organisations should also be defining what violence and abuse is, making sure this is inclusive of the broad spectrum of experience.

Beck argues that inherent within the risk society is a distrust of organisations and an anxiety toward the unknown. Many workers reported not trusting managers or organisations to act upon reports and therefore did not 'see the point'. Experts, according to Beck, are given sole responsibility for defining agendas and imposing their own foundations for risk discourse within their institution. As a result it is natural that issues of credibility arise. How then can the organisation build a more credible reputation when faced with this distrust? Structural changes in the workplace, in line with Beck's ideals of reflexivity, mean that the individual can help create this change and determine their rights and the rules around reporting, and tolerable levels and acceptance of violence and abuse. Beck argues that it is vital to report incidents so as to successfully predict risk, to allow the accident taken on its own to be random and unavoidable, to be treated as predictable and calculable.

### Training

Directories of training are readily available from Local Authorities, yet workers report that they have had no training specific or relevant to violence and abuse toward child protection workers. Research tells us that staff need structured training (Breakwell, 1989 and Littlechild, 2003). Most workers are relying on training which in some cases is more than ten years out of date. Newly qualified workers felt that their degree did not prepare them for front-line practice, many stating that 'they came into social work to help people but found a different reality'. The majority of workers did not have an induction, stating that 'they hit the ground running'. Many reported that they were unaware of training opportunities and in other cases workers felt that a lack of time meant they could not research training for themselves.

### *Social Work Education*

HCPC (Health and Care Professions Council) set out the curriculum for social work education and as part of this, do not specifically stipulate that social work education should include health and safety. When researching what universities offered in terms of educating trainee social workers, the closest universities got to providing support with this particular topic was a module on 'communication'. It would appear that it is left to the employer or practice placement teacher to train students or newly qualified social workers on violence, abuse, perpetrators and personal safety at work.

Literature suggests that newly qualified workers and students are more likely to experience violence and abuse (Weinger, 2001 and Littlechild, 2003). This study found that newly qualified workers felt that their university education did not prepare them for practice. Several newly qualified social workers stated that they felt they learnt the necessary skills by 'having a good placement and being lucky'. Workers reported that there is not a module on worker health and safety or dealing with difficult and challenging clients. The lack of content specifically relating to violence, abuse, risk and worker safety on university courses is concerning considering that after three years workers are expected to practice independently. The idea that resilience can be learnt would suggest that having a module based on safety, risk assessment, diffusing potentially volatile situations, and violence and abuse should form a mandatory part of the social work degree. This study would suggest that students must be better taught how to manage the personal impact of the job: not just the personal attacks but the everyday child abuse and neglect that they hear about and have to personally and professionally digest. The idea of good practice placements must be developed further and integrating students with clients and social workers should be more overtly practiced. The statistics from literature and the findings of this study quite clearly demonstrate that the social work degree does not prepare staff for practice realities, a fact which is concerning for workers, but also for those vulnerable members of the community whom they serve.

Therefore, this study would argue that personal safety at work, managing difficult and evasive clients, and health and safety awareness should form a mandatory part of social work education. HCPC and universities should look to local authority training providers to buy in the best-equipped trainers so as to produce a module which will support newly qualified social workers to have an increased awareness, resilience and are better skilled to deal with violence and abuse in the workplace.

### *Induction*

In most cases workers reported that they did not have an induction, suggesting that workers are not being appropriately integrated into councils or being taught about the policies and procedures in place to firstly protect them but also the guidelines within which they must practice. Staff needing better inductions echoes those sentiments described in Littlechild's (2003) study with local authority managers. This led to workers lacking confidence in practice and 'second guessing' themselves; workers therefore

accepted the culture of 'get on and do it anyway' and 'ask no questions'. The finding that social services are understaffed and lack the resources to conduct the job with time, reflection and fidelity is therefore reinforced. As Stanley and Goddard found, workers' safety is secondary to that of meeting the needs of the clientele. Findings illustrate that child protection workers work very much 'in the moment' with limited time to prepare or 'read ahead'; some workers likened this to the way clients live, 'chaotic and reactive' in approach.

### *Lack of Training*

Training is essential to building worker confidence, understanding and employment of an evidence-based approach. Respondents from this study reported that they were unaware of training programmes targeted at this specific topic and some workers reported having 'no local authority training'. This meant that some staff were relying on training from almost ten years ago. Training was also said to be non-specific; one worker stated that a farmer was on the same risk assessment training. This undermines the level of risk assessment that child protection workers undertake on a daily basis, likening their work to that of a farmer or a librarian. Breakwell (1989) believed that with training, social workers could predict which situations are likely to be dangerous and learn how to diffuse encounters which 'turn nasty'. Findings from this study found that experienced workers still struggled to assess risk and experienced the same negative effects as workers with less experience in practice; therefore, training needs to account for every worker regardless of their experience. Training is especially important if staff are to understand firstly the affects of abuse and violence, but secondly to understand what violence and abuse consist of in practice. This study found that better training in turn would have a positive impact on reporting procedures.

### Policy and Procedure

It would appear that the councils taking part in the study have stringent policies and procedures in place to protect staff. Legislation places a responsibility on employers to proactively assess, manage and review risk to staff. As such, councils employ a 'Lone Working Policy' to protect staff conducting lone visits to client's homes. Findings from relevant research support the ideals of legislation where there are incidents of violence:

the worker involved must be supported and their experiences must be used to protect themselves as a worker, as well as the clients involved (Weinger, 2001). Workers report that in practice procedures are not followed all of the time.

### *Legislation and Employers*

The Health and Safety at Work Act 1974 and the further regulation the Management of Health and Safety at Work Regulation 1999, place emphasis on employers to actively assess, manage and review risk to staff. They charge employers with the legal responsibility to ensure the wellbeing, and good health and safety of all workers employed. As with Weinger's (2001) findings this study found that employers only react after an incident has occurred and even where workers reported abuse or violence in some cases there was no reaction, support or review of staff safety. There is an apparent gap in communication between directors, managers and child protection workers. Beck believes that social actors, in this case the child protection worker, are dependent on the experts (managers/directors) for knowledge and guidance. How with this divide can employers fully understand frontline realities and write policies? In turn how can workers practice effectively without evidenced policy and procedure?

This study found that known criminals, child protection conferences, attending court, asking to see the child alone and removing children were all triggers for violence and abuse. Therefore policies and procedure can take these high-risk activities into consideration when producing guidelines for staff. Employers can also take a more proactive role when assessing risk to workers carrying out these tasks. Newhill (2004) found that currently 'conservative policies' do not account for the emotionally vulnerable client group. Safety concerns need to be made a priority by employers not only for staff but for the vulnerable children social services aim to protect. Literature looks at the removal of home visits as an ill-advised method to protect staff and children (Brown, Bute and Ford, 1986; Lupton, 1994; O' Hagan and Dillenburg, 1996 and Weinger, 2001). As with cases such as Victoria Climbié, removing home visits and not seeing a child alone (amongst other issues) led to this young girl being murdered at the hands of her abusive carers. Greater efforts need to be made to ensure workers are safe when entering potentially violent and abusive homes but not to the detriment of the children they are ultimately trying to protect.



Beck (1992) argues that physical risks are always created and affected in social systems. For example, organisations such as social services that are in place to manage and control risk could at the same time be creating risk through its systems. The concept of the risk society looks at how risks and hazards systematically produced as part of modernisation be prevented, minimised, dramatised and channelled. It raises questions of organisational risk management. To combat this, Beck proposes a reflexive learning process. This process would recognise the conditions underpinning expert conclusions and should examine these with the benefit of different forms of knowledge held by people other than the so-called 'experts', in this case child protection workers. For example, the findings from this study could evidence areas for policy development and training, as sexual harassment, stalking and being held hostage emerge as a predominantly female experience.

As is reported in this study and highlighted in current research, staff are unaware of procedures in place to keep them safe. They are also unsure of their rights once violence or threats of abuse have taken place. There seems to be confusion in practice as to how a worker reports and records threats, abuse and violence. Over fifty per cent of workers have been informed of procedures to support them in the event of a violent or abusive incident at work. Although over half the respondents had been informed of procedures, correspondingly there were a small percentage of workers who still remained unaware of how to actually access said support.

### *Lone Working Policy*

The Lone Working Policy was a topic for heated debate during the interviews for this study. Other literature does not focus specifically on the Lone Working Policy but rather on policies in general. This study found the Lone Working Policy to be ineffective and not followed through in practice.

The Lone Working Policy is dependent on managers and their execution of the policy in practice. The Lone Working Policy employs the use of code words, mobile phone use, panic alarms and in some cases a 'whereabouts board'. These systems are dependent on workers using mobile phones to call in after visits but moreover it is dependent on managers adhering to policies. This study found that when calling in at the end of the day, many workers found their managers' mobile phones were switched off or likewise if they had forgotten to call in, they were not called to check whether they were alright.

In some extreme cases workers had been held hostage for a number of hours before anyone had noticed they were missing.

This scheme needs to be used one hundred per cent of the time to ensure worker safety. As was recognised by managers and staff, workers might be safe the majority of the time but there were readily available examples of where staff were put at risk as a result of the Lone Working Policy not being followed. Workers reported complacency in practice; for example, staff were not called at the end of visits and whether staff still had their panic alarms or carried mobile phones was not checked. When phoning in for help and using a code word, staff found that the person (including managers) receiving the call did not know the code word.

Even with the Lone Working Policy in place fifty-four per cent of workers were still avoiding home visits. This would suggest that the Lone Working Policy is ineffective. The policy is in place to ensure worker safety, however with this percentage of workers avoiding home visits, staff do not feel safe in practice. Many workers questioned how a mobile phone made them safer, when in reality would a worker be able to use their phone in the event of a violent incident? The majority of staff would state 'no'. In 2004 Broadhurst, Hawkins and Briggs found that sixty-three per cent of workers had experienced incidents both when working with a colleague and when working alone. Incidents reported in this study found the same to be true.

Lone Working Policies are in place to protect the worker who is working alone in the community. It should mean that managers are always aware of a worker's whereabouts, a worker should call in after successfully completing every home visit and code words should be used in emergencies. As demonstrated above this is not the case in practice but why is this comprehensive policy not effective in managing worker safety? Child protection workers are asked to enter potentially volatile situations alone and they are then reliant on managers to effectively manage this activity being aware of all the risk factors.

Workers who do not feel that it is safe to conduct a home visit often conduct meetings in the office, but state that it is almost 'impossible to get clients to visit the offices'. Many staff reported that if they were genuinely worried they would take a co-worker with them. This means that the individual worker is dependent on the institution to keep them safe. This links back to communication and its importance in the management of

risk to workers, firstly in gathering information on potential risks, and then to the management of risks during home visits and in supporting staff in the aftermath.

## **Conclusion**

This chapter discussed the impact of violence and abuse toward child protection workers has outlined three key contributory factors: the worker, the team and the organisation. Each factor in some way contributes to the assessment, prevention, production and management of violence and abuse in practice.

Beck argues that the individual is asked to assess and cope with risk alone in a post-traditional society. This study found that workers are feeling increasingly isolated in how they experience and manage the impact of violence and abuse, substantiating Stanley and Goddard's (2002) research which found workers' feelings of isolation stemmed from a lack of support and understanding from management.

Violence and abuse in practice affected workers professionally as well as personally. Workers reported that risk, violence and abuse affected approach, case management and decision-making. Staff noted that they would avoid unnecessary contact with clients and indeed home visits. This was especially the case where participants were working with criminals. Broadhurst, Hawkins and Briggs (2004) found that the child's needs were secondary to those of appeasing the perpetrator, which links to findings that workers avoided confrontation with perpetrators, in some cases not communicating with them.

The qualitative findings of this study suggest that the team and management are essential to workers feeling supported, and that these relationships are often used to offload tensions in an attempt to cope with experiences in practice. Where managers neglected their duties and did not follow policy and procedure, staff felt insecure and at risk. In these cases workers turned to informal support networks not only to offload but also to ensure their day-to-day safety. This was an area that lacked research in reviewed literature.

It is a popularly-held belief in the child protection arena (taking part in this study) that workers and managers need to be better equipped to deal with violence and abuse. Research suggests that there is a lack of relevant training in practice which needs to be

addressed by the organisation. Current policies and procedures need to be reviewed and reinforced from the directorate down to frontline staff.

Stanley and Goddard (2002) reported that workers often put themselves at risk in an attempt to protect vulnerable children. This corresponds with the finding that workers are practising in an organisational culture which accepts violence and abuse as part of the job. Furthermore, this culture leads to underreporting and a lack of understanding as to what violence and abuse constitutes in practice. A lack of understanding leads to tolerable norms of aggression and violence existing in practice (Johnson, 1988; Breakwell, 1989; Norris, 1990; Lupton and Gillespie, 1994; Pahl, 1999; Gill, Bowie and Fisher, 1999; Weinger, 2001; Stanley and Goddard, 2002; Littlechild, 2002; Littlechild, 2003; Bowie, Fisher and Cooper, 2005; Littlechild, 2005; Trotter, 2006 and Waddington, Badger and Ball, 2006).

The individual worker is asked to assess, prevent and manage risk in practice. However, staff are practising within teams and furthermore organisations which in themselves create risk. This in turn leads to a perpetual cycle of workers being overly risk-adverse and working in fear; then with a lack of management, risk is manufactured and later handled ineffectively by the organisation.

Based on the key points made in this chapter, the thesis will now go on to make informed recommendations for changes to current policy and procedure. These recommendations will look at improving key messages (organisational culture) and understandings of violence and abuse in practice, reporting methods and support for staff in the aftermath of an incident.

## Conclusion

*"More demands on child protection services and more cases to allocate can mean safety is not always a priority; unfortunately we have grown to accept abusive behaviour as part of the job. So there is no need to report. I have seen cases where because there is difficulty visiting the family due to violence and abuse of various kinds things have been missed. Fear is what occurs on a day to day basis in our job, we are not protected" (QSW, Council B).*

## Introduction

This study has set out to examine the impact of violence and abuse on child protection workers. Drawing on current research and risk theories (namely Ulrich Beck's 'the risk society'), the previous chapter gave an analytical account of the findings from this study. This chapter will conclude these findings, making recommendations for policy and procedure. Suggestions for future academic research will be presented with reflection on the limitations of this piece of research. The study sought to determine the impact of violence and originally hypothesised that this impact would be negative. Therefore, throughout the thesis there has been a focus on four central research questions. These are: the form and frequency of violence directed towards child protection workers; the experience and reporting of violence by child protection workers; and the affect and management of violence. Finally policies and procedures relating to violence perpetrated against child protection workers were examined.

This exploration found that the worker, the team and the organisation are all contributory factors to violence and abuse in practice. These aspects will form the foundation for the policy recommendations and basis for theoretical implications which follows.

The chapter will restate the key findings from this study and will be followed by an analysis of the implication of these for theory, policy and practice. The chapter will explicitly state how the thesis has made original contributions to current thinking in this field, and will outline finally the limitations of this study and areas for future research.

## Key Findings

The following section is divided into three sub-sections, which detail the findings with respect to the original research question. Form and frequency will be discussed, detailing the difference found between verbal and physical violence. It was found that

there was underreporting in practice and this will be explained in 'experience and reporting'. Case management and decision-making were directly affected in practice, and this key finding will be described in the final sub-section 'affect and management'. The findings from this study offer a unique insight into violence and abuse, and how these are experienced in practice by child protection workers. The following will provide an explanation of the key findings, later the chapter will move on to make evidence-based recommendations for policy and procedure based on these key findings.

### *1. Form and Frequency*

A distinction was found between form and frequency of violence and abuse experienced on the frontline. Verbal abuse was a more prevalent experience and in the majority of cases had a significant and long-term impact for child protection workers. Verbal abuse reportedly occurred on a daily basis whereas incidents of physical violence were more likely to occur on a monthly basis, or less frequently. Impersonal forms of verbal abuse increased workers' feelings of stress, insecurity and anxiety whilst being threatened by a client increased these feelings in one hundred per cent of cases. Physical attacks were reported and these spanned from kicking and slapping to being held hostage and sexually abused. Therefore with respect to the original hypothesis the findings from this study suggest that all forms of violence and abuse have a negative impact on child protection staff. Thus verbal abuse needs to be recognised by Children's Social Care agencies and moreover acknowledged in policy and procedure.

A strong sense of 'luck' and chance emerged from the qualitative findings when discussing the form and frequency of violence and abuse in practice. The idea of luck is an original finding from this study, one which has not been found or explored in previous research. This offers a new perspective on the analysis of violence and abuse on child protection work. Luck is not only a catalyst but also one of the central impacting factors for workers in practice. Luck also provides a rationale for continuing to work in dangerous situations, it is as though staff feel like fate will decide, 'I am powerless it is just bad luck if I am violated'. Further exploration of this finding suggests that the idea of violence and abuse is perhaps exacerbated in practice; as a result feelings of 'luck' or 'fear' are intensified. Workers felt 'lucky' when they returned safely and unharmed after home visits, child protection conferences or court hearings. In reporting this 'lucky feeling' it transpired further that workers frequently felt a sense

of fear and foreboding on the frontline. It can therefore be deduced that when discussing form and frequency in the context of workers feeling lucky, that luck represents a lack of support and protection from organisations and a sense that risk is felt to be ever-present by child protection workers.

## *2. Experience and Reporting*

Prior knowledge was seen in some cases to be positive as it helped workers plan home visits and led to increased joint working. However, prior knowledge did not alleviate negative feelings for workers. It would therefore be futile for managers and organisations to rely on risk assessments and the prior knowledge that these generate as the only tool for managing worker safety. Respondents felt they could not effectively manage their safety without prior knowledge of the client, but this then evoked personal feelings of insecurity, anxiety and threat, making the discussion of prior knowledge a contentious one. There was a tension between needing prior knowledge to ensure professional safety and the fact that this knowledge would evoke a personal emotional response, which for some staff was overwhelming and seriously impacted on their ability to function as a child protection worker. In reference to this key finding, a complex set of issues needs to be addressed, which will be discussed later in the 'recommendations for practice' section. The findings suggest that completing a risk assessment is not the answer to worker safety and well being.

The majority of respondents stated that they would report violence; upon further examination staff were not using the correct reporting procedures or reporting to managers. The majority of child protection workers would not report verbal abuse and in many cases did not report physical abuse either. Verbal abuse is the most prevalent form of abuse but seemingly this is not reported to managers or recorded as an incident on systems and this directly impacts risk assessments, worker safety and policy amendments. Without reporting, organisations cannot gauge how to tackle this issue.

By prioritising the needs of clients over staff the organisational culture lends to staff underreporting. Underreporting then leads to staff being at increased risk due to risk assessments not being completed. Finally this means procedures in place to deal with practice realities are ineffective. With reflection on current and relevant literature this

key finding would suggest a perpetual cycle that has been present for at least twenty years. According to this study, the 'perpetual cycle' of underreporting has not changed. Literature, suggests that workers lacked support in practice and were underreporting (Rowett, 1986; Breakwell, 1989; Norris, 1990; Bowie, 1996; Newhill, 2004 and Trotter, 2006). Reporting is therefore fundamental to breaking this cycle, improving outcomes for clients, and minimising impact for the individual child protection worker.

Why are workers not reporting? A lack of supervision from managers, inadequate policies and an organisational culture which tolerates and accepts violence and abuse were given as reasons for non-reporting, with workers feeling there 'was no point'. It was found that violence and abuse are accepted as part of the job by staff, management and the organisation. This is a key finding, as an acceptance of violence and abuse influences all areas of practice, management and policy.

There are certain tasks that often carry greater risks; for example, workers removing children, sharing child protection reports with families and attending court. Frontline staff reported that these tasks would normally entail some level of verbal abuse or in some instances stalking, criminal damage or physical attack. With this in mind, policy and procedure can focus attention on areas that may need more consideration. Policy has a tendency to concentrate on lone working; this study found that the tasks which carry greater risk are incidents which occur in public spaces with other professionals present. Therefore being in a council building with other professionals does not minimise risk or impact on the worker. This finding demonstrates that working alone is not the only time that workers are at risk. Furthermore, working with colleagues does not increase the protection of staff.

### *3. Affect and Management*

As a customary part of everyday child protection practice, workers stated that violence and abuse did have a direct impact on service delivery. Staff reported that in some cases they would avoid home visits and contact with perpetrators, cases would be closed prematurely or workers would be reassigned due to a client's manipulation. Workers admitted to withdrawing services or changing their decisions as a reaction to violent or abusive episodes. The death of Victoria Climbié highlighted the importance of seeing the child alone and conducting home visits. It is of concern that to date violence and abuse are having a negative impact on service delivery. This could potentially lead



to vulnerable and abused children being left at risk and ultimately could be contributing to the NSPCC figures on children known to social services who die at the hands of their caregivers.

Management and informal support networks were seen as vital to 'surviving' child protection work. In examples where workers were in unsupportive teams and lacking supervision, the affects of violence and abuse were heightened and unmanageable, leading to illness and time off work. This would also increase the impact on case management, decisions and service delivery. Support is vital both professionally and personally for staff. This point has been noted as crucial by academics (Johnson, 1988; Breakwell, 1989; Lupton and Gillespie, 1994; Pahl, 1999; Gill, Bowie and Fisher, 1999; Stanley and Goddard 2002; Littlechild 2002; Littlechild, 2003, Bowie, Fisher and Cooper, 2005; Littlechild, 2005; and Trotter 2006) as far back as the 1980s. So why then are workers still reporting a lack of support and understanding in practice? Staff receiving regular supervision and support from experienced managers felt confident in practice and noted that they would see a case through to fruition. These examples of good practice need to be developed and maintained across all child protection teams.

### **Implications for Policy and Procedure**

The key findings from this study have highlighted areas of strengths and difficulties within current child protection practices. Service delivery and frontline practices are directly impacted by violence and abuse but in many cases current policy and procedure lack the emphasis to combat this impact. With this in mind the following section aims to leverage current procedural strength and develop this, and make recommendations to improve current policy.

#### *Risk Assessments*

Organisations should be aware that child protection workers are currently underreporting violence and abuse and therefore risk assessments are not accurate or up-to-date. Furthermore, current risk assessments are not inclusive of all forms of violence and abuse, and neither is the incident form used in local authorities. Therefore policy and procedure need to be reviewed so as to include the most prevalent form of violence, which is verbal abuse.

Bullock (2010) argues that tick-box assessments have replaced clinical or moral judgments of offenders in probation risk assessments. This was also found to be true in social service agencies taking part in this study. Utilising a tick-box exercise to predict risk does not go far enough to protect staff. This study found that staff often assessed situations based on a 'gut feeling'; as with Bullock's findings (2010) this study agrees that risk assessments need to be more than a tick-box exercise and allow for moral and clinical judgements to be made.

An added complexity is that when undertaking multi-agency working or receiving a referral from another professional, there is no generic risk assessment form and sometimes a lack of communication. Organisations, managers and staff need to improve multi-agency communication so that an accurate assessment of risk posed to the individual worker is conducted and completed.

A designated officer should be appointed within the Council to take responsibility for the issues surrounding effective risk assessment and improving communication between agencies. A recommendation from this study would be for this designated officer to review current risk assessment procedures, amend these and continue to monitor their use, efficiency and effectiveness on the frontline.

### *Reporting*

The findings from this study suggest that organisational culture and systems are contributing to underreporting. Therefore, directors of service, chief officers and policy writers need to consider a campaign to ensure that child protection workers are aware that violence and abuse are not tolerated in practice. Examples of how this works in practice can be found within the NHS, Royal Mail and National Rail services. Evidence from this study suggests that this would have a direct impact on the number of workers reporting incidents of violence and abuse. According to the workers interviewed, more supportive messages from 'those in charge' would boost staff morale, productivity and feelings of security for frontline staff.

### *Training*

The quantitative findings suggest that child protection workers are not being sufficiently trained and the qualitative findings supported this; the interview data developed an understanding that the training on offer was not well advertised or well aligned to the

needs of child protection workers. There needs to be careful consideration given to this idea. Expectations of training need to balance the fact that child protection workers need to be better trained whilst understanding that in training workers more specifically and effectively, organisations should not then place greater emphasis on workers dealing with and better managing violence and abuse in practice. Ultimately this would only reinforce the culture of blame which already exists.

The realities of child protection practice make it almost inevitable that the most skilled, best equipped and thoroughly trained workers will remain vulnerable to violence and abuse on some occasions. Organisations and managers need to more efficiently raise awareness of training opportunities to staff. HCPC (Health and Care Professions Council) and other governing bodies need to review their current curriculums and look to be more inclusive of practice realities, training staff with frontline realities in mind. Quality assurance officers and training development staff need to employ training opportunities which specifically relate to child protection work and managing difficult and challenging clients, personal safety, diffusing potentially volatile situations and risk assessment training. Organisations may be able to draw upon training from other relevant agencies, for example, the Police.

### *Support*

Workers stated that support networks were crucial to 'surviving social work and staying sane'. It was reported that strong informal support networks have already been built by child protection workers. Organisations should grow informal support networks by supporting staff to engage with monthly 'networking coffee mornings' or supplying lunchtime exercise groups, for example, Pilates and meditation. Organisations should employ the use of buddy systems alongside the Lone Working Policy to encourage staff to build meaningful relationships with a colleague. This would also ensure staff safety and encourage joint working.

Supervision is a tool which is currently used to support staff. The findings from this study suggest that currently this is an inadequate form of support in the majority of cases. Therefore it is suggested that current supervision tools are reviewed and that managers are monitored to ensure that staff are getting regular and thorough supervision. Clinical group supervision could be introduced to provide staff with the

peer support they require, but furthermore to offer them structured, clinical support and reflection time to mitigate the aforementioned negative impact of violence and abuse.

Staff also reported that they felt unsupported in the aftermath of a violent or abusive incident. Therefore this study recommends that social service organisations review current provision for support. In both local authorities taking part in this study, counselling was offered but this had to be sought and instigated by the individual worker. There was no encouragement from managers or consideration for this in the worker's caseload. Child protection workers need to be better encouraged to take TOIL, annual leave and a lunch break in order to support their emotional and physical wellbeing.

### *Organisational Culture*

The subliminal messages delivered both to staff and clients through inaction, ineffective policy and procedures, and a tolerance of violence and abuse need to be reviewed by organisations. Local authorities need to take a revised approach to the prediction, prevention, and production of violence and abuse in practice and the protection of child protection workers. For example, local authorities could take a zero-tolerance policy to violence and abuse and openly advertise this. Primarily there needs to be a change in approach from social workers, since home visits start with a worker informing clients how to complain about their service. There should be a charter of expectations set out between worker and client so that there are rights and responsibilities on both sides. This method of working would serve to enhance partnership working and balance power between both parties.

### *Officer/Rep*

Councils would be advised to employ or promote an experienced child protection worker to implement and monitor the above recommendations. Workers are currently underreporting and evidence would suggest that there is a large gap in understanding between staff, management and directors. Therefore if there was a child protection 'rep' who was known to all frontline staff, that workers could go to and discuss practice issues and realities with, this person could then be the link between the frontline and directors of service, in turn bridging the gap of knowledge and awareness. This rep

would need to be seen as a peer so as to open social workers up to the possibility of sharing information or concerns without fear of repercussions.

### **Theoretical Implications**

A review of relevant risk theories was undertaken as part of this study and these along with Ulrich Beck's 'risk society' underpin the thesis and contribute to its arguments. The theories chapter analysed first, second and third order risk theories, in an attempt to understand and recognise the theoretical knowledge base from first order theories, to policy and finally the impact for face to face practice.

The following section will provide an overview of how this thesis contributes to current theoretical knowledge, and adds to the debate on risk, and areas for future theoretical development. In many ways this study concurs with Beck's concepts of individualisation, biographies and lifestyles; however, there are areas of the risk society were not applicable to all areas of this study.

This study found that child protection systems can in themselves be abusive for both the client and child protection worker. This reflects Beck's (1992) observations relating to the nature of organisations and risk. Interview findings reflected that policy and procedure can at times increase risk to workers or generate unnecessary risk. The underpinning theoretical concept generated from this study's findings highlights the organisation as a key contributor to risk, violence and abuse in practice. For example, when delivering news to clients, child protection workers must firstly be given a decision by a manager; in some cases where the manager changes their mind this can cause friction leading to verbal abuse, threats or physical attack. In other examples, the systems and approaches used by child protection workers can be inflammatory. This agrees with Beck's argument that institutions characterise and produce risk through systems and experts.

Child protection workers are increasingly asked to manage their personal safety at work with little input from social service organisations. Littlechild (2008), Denney (2009) and Kemshall (2002) all note that current policy and risk assessment tools are to heavily relied on to accurately assess risk and prevent violence and abuse. According to Beck (1992) the risk society has generated a more individualised society meaning that people are free from traditional societal ties to choose the risks they take,

individually define risks and manage the consequences. This concept was linked to the findings of this research in that frontline staff believed that risk management is a personal responsibility whilst they looked also to the organisation for more support. Therefore this study found that Beck's notions of individualisation are being felt within social services and furthermore that the organisational policies and procedures place responsibilities on the individual worker, deflecting this from the organisation. The idea of luck fits with this individualisation of risk and deflection of accountability, due to organisations being ineffective in the prediction and prevention of risk and protection of staff, child protection workers are now psychologically relying on luck to keep them safe on the frontline.

Beck's theory does not allow for an understanding of the socio-economic background of child protection clients. Beck also does not acknowledge the complexities found within families in relation to culture, ethnicity, gender, sexuality and class managed on a daily basis by social workers. It has been argued by Beck's critics (Mythen, 2004 and Denney, 2005) that risks are now exaggerated and that there is now more protection than risk. This might be true of society more generally but in child protection work it is often the case that there are more vulnerable children at risk than there are staff to protect them. It would be imprudent to suggest that everything in the child protection arena can be reduced to risk. Thus Beck's theory of the risk society does not satisfy all areas of interest when attempting to understand the complexities of violence and abuse within child protection work. Social learning theory and Freud's theory of innate aggression have been explored as possible explanations as to why individuals may become violent and abusive.

An emerging idea from this study is the notion of 'luck'. 'Luck' with respect to violence and abuse in social work is a concept which has been theoretically developed in this thesis, giving growth to Beck's idea of risk. Analysing risk by looking at the feelings experienced by individual workers may be the key to better managing and understanding the impact of violence and abuse at work.

### **Original Contributions to Violence Research**

This study has made several contributions to research knowledge on violence and abuse in social work. The literature review highlighted areas in the current body of research which needed further exploration and this provided focus areas for this study.

For example, the study was more inclusive of all types of violence and abuse, enquiring about verbal abuse, intimidation and threats as well as actual physical violence. This study gathered data on different forms of abuse as well as information evidencing the consequences of each form. Therefore, this study is better placed to argue that child protection workers who are regularly subjected to verbal abuse and threatening language experience fear and anxiety that translate into poor decision-making and sub-optimal case management.

The key findings illustrate similarities in findings from this study and previous research literature, which emphasises that some of the key findings and policy implications have presented issues in practice since the 1980s. The following section will explicitly state these original contributions and summarise the overall impact of this study for academia.

In current and relevant literature on the topic of violence and abuse in social work the majority of studies rely on quantitative methods to gather data. This study found that there is overwhelming statistical data on this topic but that this data does not then demonstrate the affect and impact in practice. Therefore this study adds a qualitative focus to the area of research. The qualitative findings demonstrate the personal affects and subjective understandings suggested by the quantitative data. It provides a personal account of how violence is experienced on a day-to-day level in practice. In reviewing previous literature it appears that violence and abuse happen frequently and are increasing in practice.

Having said this, it could be argued that either, violence and abuse is increasing, or alternatively that, due to previous underreporting, child protection workers are now more readily reporting incidents. Local authority statistics may not reflect this increase as workers had not reported through the correct channels and therefore this study has gathered a clearer and more precise account of violence and abuse in social work. This both proves that there has been underreporting in practice and that violence and abuse are more prevalent than is documented in previous research. This study has added a new dimension to earlier statistical research providing a unique account of the experience of violence and abuse in practice for child protection workers.

## 1. Focus and Findings on Verbal Abuse

In the majority of previous literature violence has not been defined. Therefore, what was being measured was ambiguous. Where violence was defined, the definition focused purely on the physical component. In this study it was decided that a broad and inclusive definition of violence and abuse would be presented. This study utilised a definition that was inclusive of verbal abuse.

By considering the emotional impact as well as the physical affect on workers, this study has contributed original findings in the affect of violence and abuse on service delivery. Without considering this emotional component there would be no understanding as to how being threatened, verbally abused, stalked, harassed, sexually abused or physically attacked would impact on the worker and in turn the case, the family, parent or child.

Ultimately research, policy and procedure are trying to protect the most vulnerable families and children who are at risk and in need of care or service provision. By adding the qualitative findings to statistical data this research aims to galvanize a new approach to the management of violence and abuse in practice.

## 2. Luck and Risk

The qualitative findings of this study have highlighted an original insight into feelings of fear. Previously researchers have focused on risk and fear; this study has found a new dimension to feelings of fear and insecurity amongst child protection workers, 'luck'. Luck was described by some workers as their motivating emotion: they felt lucky as they had not been attacked yet, in other cases workers felt that the idea of luck led them to feeling insecure as they were leaving their personal safety to fate. This is a unique way of analysing violence and abuse and contributes a new aspect to the commentary on violence and abuse in social work.

## 3. Informal Support Networks

The Lone Working Policy, health and safety legislation, supervision and procedures in place to support staff and ensure their emotional and physical wellbeing were reportedly inadequate. An innovative examination of support networks and coping strategies found that staff utilise informal support networks to ensure safety. Furthermore, 'offloading' to colleagues, friends and spouses is used as a coping strategy by all child protection workers interviewed. These informal relationships were



seen as vital to surviving social work but previously this dynamic has not been researched.

#### 4. Prior Knowledge (Positive and Negative)

With completing risk assessments comes prior knowledge on the family, perpetrator or client that a social worker is going to visit, probably alone in the person's home. With this come notions of fear, anxiety and insecurity. Interestingly this study found that in over fifty per cent of cases, prior knowledge was seen as positive as it meant that workers could plan and prepare for visits; this finding was not anticipated by the researcher. This contributes a different point of view to current research as previously studies have reported this to be a negative experience for staff. This study contributes an important distinction between prior knowledge being positive in an attempt to be prepared but a negative in the emotions it conjures. A deeper understanding of the difference between the necessity to understand the risks and the feelings this evokes is vital to the support and management of staff.

### **Study Limitations and Areas for Future Research**

To conclude, the chapter will look at the limitations of this PhD thesis and identify areas for future research. It is important to depict the limitations of this study as briefly explained in the 'Methodology Chapter' (Chapter Three), so as to evaluate, validate and authenticate the study. The scale of debate is clearly multifaceted and extensive even within the two participating councils. To generate nationwide implementation of the policy and procedural recommendations, more research on this topic needs to be undertaken, perhaps piloting the recommendations in councils and then measuring the impact on service delivery, worker effectiveness and wellbeing. The following section will debate the merit of these ideas.

#### *Sample Group*

The study was presented to two different local authorities; due to the limitations of a personally funded PhD, the participating councils were utilised as they were two of four councils approached who were keen to participate. This study could be offered to more local authorities, therefore capturing a larger group of child protection workers.

Presenting the questionnaire to a larger sample group could garner more data and a better understanding of socio-economic effects on practice. Were the study to be undertaken in more challenging areas where there might be for example, higher poverty or crime rates, or a different level of cultural diversity, these may or may not have an impact on the prevalence of violence and abuse. Conversely, by adding to the sample group data generated, we may find organisations where there are case examples of good practice which could then be used as best practice in other local authorities.

#### *More Direct Questionnaire*

In retrospect, a more definitive and focused set of questions could have been asked in the questionnaire. The questionnaire was piloted but after receiving over seventy responses there were two questions in particular that could have been developed so that a greater understanding of the implications of respondents' answers could be gained. For example, question six, which asked "are any of your clients convicted criminals, or do they currently have any outstanding convictions?" could be developed, or a follow-up question could have been asked, to ascertain what criminal convictions were held and how many of the clients on a worker's caseload held criminal convictions.

The second example is question number thirty-two, "has your employer informed you of any procedures that are in place to support staff who experience violence and/or abuse at work?" The data gathered here generates other question such as: what procedures were you informed of? What procedures are in place? And how were you informed? These follow-up questions would then give the researcher a better understanding if all procedures had been detailed, if staff had up-to-date knowledge and if staff were indeed aware.

#### *Areas of Interest*

There are several areas of interest that this topic touches on. Therefore rather than focusing on 'the impact of violence and abuse' the study could be developed to be inclusive of several other topics. For example: fear fuelled by media reports for both the client and child protection worker and the effect of these in practice; what is the extent of violence and abuse in current practice nationwide (form and frequency); gender

experiences of violence and abuse; or change the focus to analysing perpetrators of violence and abuse rather than the victim.

### *New Research*

Recently the Department of Health (2013) has commissioned a new study to analyse violence against social care staff. It is encouraging that the Department of Health are funding research in this area, this shows an appreciation for the problem in practice and that the issue is being taken seriously. The only drawback (with relation to this study) is that again it focuses on social care broadly rather than child protection staff specifically. The study will be examining the trends and current prevalence of violence against social care and support staff; assessing current guidance and monitoring procedures that employers are using to respond to; recording violence against social care and support staff; and analysing the actions taken within the NHS in response to violence against staff. The study will utilise an online questionnaire and an over-the-phone qualitative interview process to gather findings.

### **Conclusion**

This chapter has served to conclude the thesis by summarising the key findings, making recommendations for policy and procedure, and stating the original contributions this study has made to academia. This study set out to analyse and evaluate the impact of violence and abuse toward child protection workers. It was hypothesised that this impact would be negative, and the qualitative and quantitative findings showed this to be true.

Upon analysing the data, it was understood that violence and abuse has a personal and professional impact for child protection workers and currently staff feel that this is not being addressed. The findings demonstrate that this study reflects some findings from previous research, namely that violence is underreported.

It is recognised that although this study reiterated those findings from previous research and raises cause for concern it should be acknowledged that steps have been taken to improve child protection practice. The creation of the Task Force set up by New Labour in 2000 showed an acknowledgement of the gravity of practice issues and although the Task Force did not meet their targets there have been less social workers murdered on the frontline. It should also be noted that although violence and abuse are

still underreported yet prevalent in practice that risk, violence and abuse are difficult problems for managers to handle, given the unpredictability of violence in these highly charged and emotive situations. It would be impossible for organisations to make social workers completely safe.

Most importantly, the study offers original contributions to the research in this area with findings regarding prior knowledge, luck, informal support networks, forms of abuse and effects on case management and the individual child protection worker. This thesis has therefore made recommendations for changes within practice and this study will add to the current field of knowledge with the hope that this area of interest will be developed in the future.

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## **Abbreviations List**

GSCC – General Social Care Council

TOIL – Time owed in lieu

CP – Child Protection

ATM – Assistant Team Manager

Senior Prac – Senior Practitioner

NQSW – Newly qualified social worker

QSW – Qualified social worker

GP – General Practitioner

CMHT – Community Mental Health Team

LWP – Lone Working Policy

## Appendix 1: Questionnaire

Your participation in this study is voluntary and you have the right to opt out at anytime.

The questionnaire should take you no longer than 10 minutes to complete.

Your answers are and will remain **anonymous**. Names and identifying details will not be directly used within this study or in any subsequent reports or publications. Any identifying details will be filed securely and separately from answers given in this questionnaire.

Your answers are strictly **confidential**. Data from this study will be used for the purposes of this study **only** and will not be shared with third parties.

The credibility of the research is wholly dependent on the validity of the data gathered from this survey. Similarly, any recommendations that this study might make for changes in policy, working practices and / or procedure for dealing with incidents of violence are reliant on the accuracy of this questionnaire. The researcher kindly asks that you try to answer the questions as honestly as possible.

Once you have completed the questionnaire kindly click the submit button.

Thank you for your time and consideration.

If you need help completing the questionnaire or have any questions or concerns, please do not hesitate to contact: **Lisa Wilkins** on (phone) 01344 457393 or (e-mail) [lisa.wilkins@rhul.ac.uk](mailto:lisa.wilkins@rhul.ac.uk)

For the purposes of this study 'violence' and 'abuse' are defined as follows:

The Association of Directors of Social Services: Violence is behaviour which has a damaging effect either physically or emotionally on other people.

Abuse according to the Department of Health (2003) is a violation of an individual's human and civil rights by any other person or persons. Abuse may consist of a single or repeated act. The abuse can be physical, verbal, psychological, financial, or emotional.



## **Section 1**

1. Gender: Male / Female

2. Current Post:

<b>Manager</b>	
<b>Administrator</b>	
<b>Qualified Social Worker</b>	
<b>Newly Qualified Social Worker</b>	
<b>Student</b>	
<b>Social Worker Assistant</b>	
<b>Senior Practitioner</b>	

3. How long have you been a social worker?

4. How long have you been practicing within this particular team?

5. How many cases do you currently hold?

6. Are any of your clients convicted criminals or do they currently have any outstanding convictions?

## **Section 2**

**1a.** Have you been indirectly exposed to a client swearing or using bad language whilst venting frustrations?

Yes / No

**1b.** If yes, were you left feeling threatened, intimidated or fearful?

Yes / No

**2.** How often have you been exposed to the above scenario?

Never    Daily basis \_\_\_\_    Weekly basis \_\_\_\_    Monthly basis \_\_\_\_  
Other\_\_\_\_

**3.** If you are exposed to bad language and swearing when working with a client, does this heighten your personal levels of stress?

Yes / No / Sometimes

**4.** Have you ever been verbally abused by a client?

Yes / No

**5a.** Have you ever been directly threatened with physical assault or harm by a client using intimidating language?

Yes / No

**5b.** If yes, how often?

Never    Daily basis \_\_\_\_    Weekly basis \_\_\_\_    Monthly basis \_\_\_\_  
Other\_\_\_\_

**6.** How often would you say clients verbally threaten you by using intimidating language or threatening you with physical assault or harm?

Never    Daily basis \_\_\_\_    Weekly basis \_\_\_\_    Monthly basis \_\_\_\_  
Other\_\_\_\_

**7.** How often have you been subject to threatening body language where the client's posture was intimidating, threatening and/or menacing?

Never    Daily basis \_\_\_\_    Weekly basis \_\_\_\_    Monthly basis \_\_\_\_  
Other\_\_\_\_

**8.** On how many occasions has a client used body language to physically provoke a reaction from you?

Never    Daily basis \_\_\_\_    Weekly basis \_\_\_\_    Monthly basis \_\_\_\_  
Other\_\_\_\_

**Please answer questions 9 – 17: “Within the last two years have you been....**

**9a.** The subject of physical violence?

Yes / No

**9b.** Please specify the type of violence below (select all that apply):

Scratching	Biting	Pushing/Shoving	Grabbing
Choking	Shaking	Hair Pulling	Punching
Hitting	Other (please provide a short description)		

**10.** Subjected to physical assault involving the use of a weapon? *i.e. gun, knife, chair, dog lead, bat or any other object.*

Yes / No

**11.** The subject of sexual harassment? *i.e. intimidation, bullying or coercion of a sexual nature.*

Yes / No

**12.** Subject to physical obstruction? *i.e. blocking pathway or exit.*

Yes / No

**13.** The subject of criminal damage thought to be caused by a client? *i.e. damage to vehicle, personal property etc.*

Yes / No

**14.** Subject of stalking? *i.e. client following worker to their car, waiting for the worker after work?*

Yes / No

**15.** Held hostage by a client?

Yes / No

**16.** Received written threats? *i.e. worker receiving menacing texts, emails or letters from client.*

Yes / No

**17.** The subject of harassment? *i.e. excessive phone calls or communication.*

Yes / No

### **Section 3**

1. How does prior knowledge of potentially violent or abusive clients affect you?

Negatively

Not at all

Positively

2. 'Imagine you are asked to work with a client who is known to be potentially violent or abusive.' How might your prior knowledge affect you in practice?

\* please indicate your response with a 'X' in the column on the right.

<b>Evoke feelings of fear</b>	
<b>Conduct meeting in the office rather than visit the home</b>	
<b>Ask a colleague to co-work case</b>	
<b>Avoid the client</b>	
<b>Ask your manager to assign someone else the case</b>	
<b>Other...</b>	

3. Has your employer informed you of the protocols in place to deal with staff who experience violence and/or abuse at work?

Yes / No

4. Are you aware of the National Taskforce on Violence Against Social Care Staff (NTF)?

Yes / No

5. Does your team use the 'self audit tool' implemented in 2001 by the NTF?

Yes / No

6. If you experienced violence or abuse would you report this?

Yes / No

7. Who would you report this to?

Director      Manager      Colleague      Friend      Spouse  
Other.....

**8.** If you experienced violence or abuse at work would you know how to access professional support?

Yes / No

#### **Section 4**

If there is any other information relevant to this topic that you wish to discuss but have not had the opportunity to mention, then please add your points in the box below:

### The Next Stage...

As part of this study I would like to offer the opportunity for those child protection workers who have experienced violence or abuse in the line of duty to take part in an interview. The interview will provide the opportunity to explore further topics discussed in the questionnaire. It will provide an in depth view of the day to day experiences of child protection workers. Interviews will last for about an hour, these timings can however be flexible if needed.

If you are interested in taking part in an interview, please indicate below:

- ☐ **Yes I am interested please contact me**
- ☐ **No I am not interested please do not contact me**

Contact Details:

<b>Name</b>	
<b>Telephone No.</b>	
<b>Email</b>	



## **Appendix 2: Semi-structured Interview**

### **Form and Frequency**

In your experience, what form does violence take in the child protection setting?

With what frequency do you think that violent or abusive episodes happen within your team?

As a child protection worker do you accept that violence and abuse come as part of the job?

How did your personal experience of violence and/or abuse affect you?

### **Experience and Reporting**

As a child protection worker does prior knowledge of violent or criminal clients evoke feelings of fear when conducting home visits?

Do policy and procedures (risk assessments, incident reports, supervision) set in place make you feel protected in practice?

How were you supported during your personal experience of violence and/or abuse?

What are your perceptions of being a child protection worker? Have your personal experiences effected your view of your role, the council procedures or your clients?

### **Affect and Management**

Violence and abuse is seen as customary to everyday social work, would you agree with this? If so what affect does this have on you personally?

What affects did violence or abuse have on your approach to the case?

What affect did the violence or abuse you experienced have on your decision making? Or the final outcome of the case if it was not your decision?

What affect did the violence or abuse experienced have on your relationship with the perpetrator and the family?

### **Policy and Practice**

With your personal experience in mind, what do you think could have been done avoid the violent or abusive situation?

How are you supported when lone working? How are you supported when approaching known criminals or families that are thought to be 'high risk'?

In your opinion and with your personal experience in mind, what could be improved with the current system to support child protection workers in the line of duty?

How could child protection workers be better supported in the aftermath of a violent or abusive event?

### Appendix 3: Letter of Consent

Dear [participant]

I am a second year PhD student studying at Royal Holloway, University of London. My PhD study focuses on 'The Impact of Violence towards Child Protection Workers'. I am writing to you to ask for your cooperation to complete a questionnaire which will aid my research.

The selection process for this questionnaire was broad and all the child protection workers from four different counties have been asked to participate. Participation is voluntary, your participation and any identifying factors will be anonymous. Your answers will remain confidential and will be coded when presented in the study so as not to link you personally with your responses. Under the Data Protection Act (1998) the records gathered during this study will be filed securely and information linking your personal identity and answers will be kept separately. Information will be stored for a maximum of three years after the study has been completed and will then be destroyed.

The questionnaire focuses primarily on the form and frequency of violence and abuse within child protection work. The questionnaire consists of a combination of 'yes / no' answers and multiple choice scales.

Your participation in this study would be greatly appreciated. This study aims to increase awareness of the violence, abuse and threatening behaviour that is allegedly increasing within the social work profession. The study hopes to shape policy to protect and support child protection workers in the line of duty, in the most effective way possible.

If you would like to participate in the study kindly complete the consent form attached and email back to me: [lisa.wilkins@rhul.ac.uk](mailto:lisa.wilkins@rhul.ac.uk). Please do not hesitate to contact me if you have any questions or you would like to know more.

With many thanks,

Lisa Wilkins

## CONSENT FORM

I have read and understand the above information. I agree to participate and for the information I provide to be used further in this study.

<b>Name</b>	
<b>Date</b>	

## Appendix 4: Table of Relevant Literature

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
1986	R Brown, S Bute & P Ford	Social Workers at Risk: Prevention and Management of Violence  <b>WESSEX</b>	<p>Questionnaire was sent to 560 staff working in the personal social services in Wessex.</p> <p>Most were employed by one of the three local authorities.</p> <p>Violence was defined as actual physical assault resulting in some injury or pain, while violence to property involved some actual damage.</p> <p>The sample was non-random.</p>	To encourage staff to respond to threatened violence in ways that minimise risk.	<p>338 people responded to the questionnaire: they gave information which indicated, the number of times they had been victims of violence or threats of violence in the past three years, the setting in which they worker, their clientele group.</p> <p>Despite the non-random sample group, the level of violence indicated was higher than expected.</p> <p>98 people (19 per cent) had actually been physically assaulted at least once and 62 of these (18 per cent of the total) had been assaulted more than once. 134 people (40 per cent) had been threatened at least once and 102 of these (30 per cent of the total) had been threatened more than once in the preceding three years.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
1986	C Rowett	Violence in Social Work  <b>UK</b>	Three stage research study. First stage questionnaires sent to 132 social services departments in UK.  Second stage – Mailing every social worker with direct client contact.  Third stage – structured interviews with 60 social workers who had experienced violence and 60 social workers who had not.	To understand current levels of violence in social work and the extremities of these incidents.	Violence reported although physical was in the majority minor incidents.  'Blame the victim' culture within social work departments.  Significant underreporting in practice.  Management and those in power are not taking the violence seriously and therefore reinforcing, blame culture and underreporting in practice.
1988	S Johnson	Guidelines for Social Workers in coping with Violent Clients  <b>England</b>	Firstly, the paper examines the background of the news articles and theories of aggression against the local authority guidelines.  Secondly, examines the response of Local Authorities to the problem of risk assessment and coping with violence at work.	Examines employer's responses to well the documented problem of increasing violence and abuse in social work.  Looks to assess whether the policy documents drawn up in response to said increase in violence and abuse is relevant, effective and appropriate.	The policy documents are not supportive of staff either in preparing staff for frontline work or in the aftermath of violence.  Front line workers are asked to predict and assess violence. Fault is found with the worker and no one else within the organisation when this is not done correctly.  Violence and abuse are expected and accepted as part of the documentation.
1989	G Breakwell	Facing Physical Violence  <b>ENGLAND</b>	Founded on theoretical concepts of psychology and violence.	Looks to tackle the problem of how best to manage violence.	The threat of violence is causing increasing concern for practitioners, particularly in the caring profession.

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
			<p>Firstly, Breakwell outlines what it is in professionals, which may invite others to be violent, and discusses how best we can change our behaviour so that we can work with the powerful emotions experienced by those we are trying to help without inviting unnecessary risk.</p> <p>Secondly, Breakwell discusses both how we may predict which situations are likely to be dangerous and how we may defuse actual encounters which are turning nasty.</p>	<p>The study aims to answer such questions as: when are these attacks most likely to occur? What skills are necessary to avoid or cope with them? And What can be done in the aftermath of an attack to help us cope with the traumas involved?</p>	<p>Between 1978 and 1985 it was reported in the press that four social workers were murdered by their clients.</p> <p>1 in 4 social workers are being attacked.</p> <p>Explanation of why violent attacks take place can only lend to prediction of violence rather than eradication.</p> <p>Staff need to feel and be supported; they need to receive structured training.</p>
1990	P Norris	<p>Violence Against Social Workers: Implications for Practice</p> <p><b>ENGLAND</b></p>	<p>Small questionnaire designed to help shed light on issues only touched upon or ignored by previous research.</p> <p>Views were specifically sought on the possible reluctance of social workers to report violence and the implications of this on the quality of their work.</p> <p>The small National survey was carried out by the University of Sussex school of Cultural and Community Studies.</p> <p>Questionnaire promoted a design that would</p>	<p>Violence against residential staff was the main motivation for this study. Staff appeared to lack necessary knowledge, skills and understanding of violence, and this prevented them from providing a high quality service to the people in their care.</p> <p>A retrospective premise, looking to the support and care of staff in an attempt to improve service delivery.</p>	<p>13 out of 60 authorities have been keeping records for three years of violent incidents against staff.</p> <p>25 questionnaires representing 100 social work staff were analysed.</p> <p>32 per cent had experienced 'actual bodily harm' and a further 25 per cent were exposed to violence but were physically unharmed.</p> <p>Of 57 incidents recorded, 11 involved the use of an instrument and a worrying 3 cases are described 'held hostage'.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
			yield maximum information with the least expenditure of time and resources on the part of the respondents.		Research findings confirmed under reporting.  Certain activities carry high risk: taking children into care.
1994	Lupton C & Gillespie T	Working with Violence  <b>ENGLAND</b>	Examines recent research into the nature and frequency of violence in social services.  Draws on interviews with a small staff group of twenty one, between 1980 and 1990.	Two main issues addressed as they are seen to be crucial to understanding violence in social work:  1) The centrality of sex/gender in relations of violence, women's experience of violence may differ from male viewpoint.  2) How the experience of violence for social services staff informs their professional practice with clients who have experienced violence.	It is apparent that violence against social workers is merely defined as extreme physical violence, staff's experiences of sexual, emotional and verbal abuse are being minimised.  Within the study men had experienced four violent attacks whereas women had experienced three in the same time period.  Women were underreporting in comparison to their male counterparts.  Men are more likely to experience physical violence, whereas female workers suffered more verbal, emotional and sexual abuse.  Violence needs to be acknowledged and supported through supervision and training.



Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
1996	V Bowie	<p>Coping with Violence: guide for human services</p> <p><b>AUSTRALIA</b></p>	<p>Uses a broad definition of human service worker to be inclusive of all workers.</p> <p>Summarises aggression and violence in numerous ways, collating definitions from different research pieces and drawing on all throughout the book.</p> <p>Case studies and Literature review</p>	<p>The book aims to teach practical common sense principles for the prevention and diffusion of violence and post trauma support of assaulted workers. It is practical in its orientation but also supplies some helpful theoretical background information that the reader can pursue in more detail.</p> <p>Main focus prevention diffusion and support.</p>	<p>Between 1980 and 1985 murder at work was the leading cause of fatal injuries for women and the third leading cause for men in the USA across all occupational groups.</p> <p>In 1981 the National Association of Local Government Officers (NALGO) surveyed their member on the question of assault. The main categories of staff identified as at risk were housing and social services workers.</p> <p>The numbers of staff prepared to report incidents of violence is also of some note. In a survey of all social services departments in Great Britain for reported violence against workers there was only one reported case of violence against social worker from a sample of 259 local authority social workers. However, a detailed follow up study of all social workers in one local council area found that one in four had been the victim of violence, indicating possible gross underreporting of incidence in other government areas.</p>
1996	O' Hagan & K Dillenburg	<p>The abuse of Women within Childcare Work</p> <p><b>ENGLAND &amp; AMERICA</b></p>	<p>Extensive literature review. Inclusive of childcare literature, child abuse enquiry reports, and childcare research. Also the author reflects on forty years experience in</p>	<p>Women are abused when avoiding men.</p> <p>The childcare system is in itself inclusive of abuse and lends to both the client and worker being</p>	<p>Knowledge of violence and negative statistics fuel anxiety in workers.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
			childcare practice.	abused.	
1999	J Pahl	<p>Coping with Physical Violence and Verbal Abuse as cited in 'Social Services Under Pressure'</p> <p><b>ENGLAND, SCOTLAND &amp; NORTHERN IRELAND</b></p>	<p>Utilised questionnaire method.</p> <p>After carrying out the pilot redefined the questions posed. For example: rather than asking about current post, the past 12 months was discussed and used as the focus.</p> <p>Completed a review of the current literature and research.</p> <p>It was inclusive of all social care sectors.</p> <p>A broad definition of violence was utilised.</p>	<p>The study focused on the type and frequency of violence against; social workers, residential workers, managers and care assistants.</p> <p>Comparison was drawn between England, Northern Ireland and Scotland.</p> <p>In broad terms the study looked at the nature of violence as well as the incidence.</p>	<p>High percentage of physical attack in the care and residential setting.</p> <p>Forms of violence disclosed spanned from; abuse, shouting, intimidation, physical attack and threats.</p> <p>Violence is more predominant in Scotland and common in residential work.</p> <p>The majority of violent attacks took place during the daytime toward staff that described themselves as 'on duty'.</p> <p>In ¼ of cases relatives of the service user were the perpetrators of violence.</p> <p>Men are reportedly more vulnerable than woman.</p> <p>Lack of support and no one to report to. It was concluded that more support and help was needed.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
1999	M Gill, V Bowie, & B Fisher	Violence at work: Causes, Patterns and Prevention  <b>AUSTRALIA, AMERICA, ENGLAND</b>	Mixture of literature and research review as well as open ended questionnaires.  Literature review was utilised to gather knowledge on the definitions and typologies of violence.  Open ended questionnaire was used to establish the viewpoints of human resource managers.	The emergence of workplace violence as a growing concern in an interdependent global economy has provided new opportunities to rethink and address a variety of issues concerning violence at work.  Specifically this study keenly encourages innovative thinking about the causes of, and approaches, to reducing and preventing different types of violence at work.	Every individual experiences certain types of behaviour differently. One person may view a situation as violent and threatening, whereas a colleague may not. It is important that the threatened person, who has been victimised, is allowed the reality of their personal perceptions. This means we cannot define violence just in terms of physical contact.  Researchers and practitioners need to challenge current assumptions and to increase further their knowledge about these concepts.  The analysis of questionnaire response suggests that a framework for understanding abuse and violence against business premises by considering the lifestyle and routine activity characteristics that promote abuse/violence, the triggers of incidences and incident processes can be developed.
2001	S Weinger	Security Risk: Preventing Client Violence against Social Workers  <b>AMERICA/ INTERNATIONAL</b>	Literature review was utilised to gain a clear understanding of why and when violence occurred, this was then interpreted to provide definitive ideas and theories of how to deal when faced with a violent or abusive situation.	Social service agencies and individual social workers often take measures to increase employee and personal safety only after there is a violent incident that causes serious injury. Because the feelings exchanged in the worker client relationship it is difficult to consider that one of them might hurt us. Perhaps it is not surprising	Even though 100% safety cannot be ensured, social services can do their utmost to reduce the risk of violence. Because this has not been a focus of the profession before now, today we have an urgent need to make safety issues a priority.  When there are incidents of violence, the worker

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
				<p>that as a profession social work has been reluctant to address and implement safety procedures.</p> <p>This book looks to enable social workers to consider safety before a problem such as violence or abuse occurs.</p>	<p>involved must be supported, and their experience must further develop our responses and interventions to protect ourselves as workers and the clients involved.</p> <p>Research indicates that at least ¼ of professional social workers will confront a violent situation on the job.</p> <p>½ of all human service professionals will experience client violence at some point during their careers.</p> <p>Students and new social workers are more vulnerable than experienced practitioners.</p> <p>Social controls roles for social workers and a negative image of social workers, as well as cuts in services and provisions were given as possible reasons for an increase in violence.</p>
2002	J Stanley and C Goddard	<p>In the Firing Line: Violence and Power in Child Protection Work</p> <p>AUSTRALIA</p>	<p>Interviews were conducted with a random sample of 50 child protection workers.</p> <p>The second main source of information came from protection files on 50 children. These files were randomly drawn from the current cases of the 50 interviewed</p>	<p>The study is about violence towards child protection workers and the ability of the child protection system to protect children who have suffered abuse, assault and neglect.</p> <p>This study examines many of the difficulties inherent in attempting to protect children from</p>	<p>That whilst 22 workers received threats of assault, only 9 had been assaulted by another person, whilst 4 workers had been assaulted by a person with a weapon.</p> <p>It is possible that a worker may have been traumatised by knowledge of violent and</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
			protective workers.	<p>further harm.</p> <p>This study reports on two factors which have received little attention in child protection literature. Firstly, the context of which violence may surround severe child abuse and neglect. Secondly, examining the concern for the physical, intellectual and emotional isolation of the protective worker.</p>	<p>criminal activities in the community. For example the natural mother was recorded as being involved in criminal activity in 22 of the 50 family case files sampled.</p> <p>Little attention is currently paid to the workers feeling of support or isolation in their work. This study claims that hostage theory at least partially explains why some children who are under the care of protective services, are not adequately protected and continue to experience abuse.</p>
2002	B Littlechild	<p>“The nature and effects of violence against child protection workers: Providing effective support” BJSW</p> <p>AMERICA, ENGLAND and FINLAND</p>	Questionnaire’s, Interviews and literature review.	This article examines the experiences and views of child-protection social workers and managers in relation to the management of violence against child-protection social workers in a large county council’s Social Services Department.	<p>These findings demonstrate the importance of the role of managers and agency support systems in dealing with such matters.</p> <p>The findings suggest that in certain types of situations, workers’ effectiveness can be compromised when carrying out their roles in both supporting families and protecting children. They also illustrate the types of agency responses which professionals and managers find helpful and unhelpful in response to parental threats and aggression. In particular, the importance of supervision and support from managers is addressed, as are the implications of the findings for practice and</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
					agency support strategies for workers.
2003	B Littlechild	<p>“Working with aggressive and violent parents in Child Protection social work”</p> <p>PRACTICE</p> <p>ENGLAND</p>	<p>Review of interviews with managers from 2002 and a further review of interviews and questionnaires with child protection workers in the same agency.</p>	<p>To look at the problematic areas to be addressed in order to provide the most effective forms of supervision and support. Also to make links between risk to worker and risks to abused children.</p>	<p>Found a lack of research on this topic.</p> <p>There is an avoidance of the issue in practice. The perception of staff is that violence and abuse are increasing in practice and that it is accepted as part of the job.</p> <p>Lack of support and reporting for indirect violence.</p> <p>Certain tasks carry greater risks.</p> <p>There is a psychological effect for staff that experienced violence and abuse.</p> <p>There is a need for better policies and procedures.</p>
2004	C Newhill	<p>Client Violence in Social Work Practice: Prevention, Intervention and Research</p> <p>AMERICA</p>	<p>Reviews existing studies, both in the United states and internationally on client violence and social work practice.</p> <p>Provides case studies to provide a clinical context. These cases come from three sources: data from client violence study Newhill 1996, cases from unpublicised crisis</p>	<p>The study was undertaken to realise the extent and increase of violence in the 21<sup>st</sup> century, as reportedly there was an increase to be concerned about.</p> <p>Study functions on the notion that social workers suffer violence due to two provocative factors; “the social workers dilemma – care versus control”, and</p>	<p>Although there has been some research in this area, there is still a lot we do not know about the incidence, prevalence, and nature of workplace violence. There is still no national database that tracks workplace violence and professional social work practice.</p> <p>Actual attacks are most likely to be reported.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
			casebook composed of cases collected over the past 20 years, and three cases reported by popular press.	"Conservative social policies and desperate clients".	
2004	D Broadhurst, R Hawkins, & F Briggs	Violence, Threats, and Intimidation in the lives of professionals whose work involves children  AUSTRALIA	35 item questionnaire inclusive of both qualitative and quantitative questions.  Questionnaire was completed by 721 self selected participants.  Of these 10% stated that they had not experienced violence, abuse. Threats or burnout at work.	Violence threats and intimidation confront many working professionals working in the area of child protection. While there has been increased international concern about this topic, there has been no previous study in Australia.  This study was prompted by a similar study undertaken by the British Association for the Prevention of Child Abuse and Neglect (BAPCAN) the rationale therefore stemming from the growing international concern for social workers engaged in child protection practice where increasing levels of violence were being reported. How this affects the worker personally, their client and case, and how violence is dealt with by management are of primary concern here.	84% of respondent were female.  91% of respondents had experienced intimidating behaviour, 72% had experienced threats of violence, 41% had experienced ongoing harassment.  24% had experience actual physical violence. 63% of workers had experienced these incidents both when working with a colleague and when working alone.  Children's needs were found to be secondary to those of appeasing the abusive and/or troublesome parent. The child's safety in some cases was given low priority.
2005	V Bowie, B Fisher & C Cooper	Workplace Violence: Issues, trends and strategies	Review of international literature.  Exploration of issues through data obtained	The features of this study include: and emphasis on an integrated and comprehensive typology of workplace violence, a focus on new and emerging	Recent statistics show that domestic related homicide, sexual and physical assault, and stalking are increasingly spilling over into the

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
		<b>INTERNATIONAL</b>	from a nationally representative 'National Organisations Survey of US companies' that provides an overview of the extent of reported workplace aggression.	issues in workplace violence, the inclusion of terrorism within a framework of workplace violence, an emphasis on human services element within responses to violent incidents and an international focus on contributors.	workplace.  There currently is a gap in the identification and prevention of response to domestic violence by employers and heir organisations.  The organisational climate has a major influence on employee's ability to cope with the violence and trauma they face as part of their work role.
2005	B Littlechild	"The Nature and Effects of Violence against Child Protection Social Workers: Providing Effective Support" BJSW  ENGLAND	Review of Literature. Questionnaire - distributed in a large county councils Social Services Department.	Examines the experiences of CP workers and managers, looking at the management of violence against staff.	Highlighted the importance of support and managers.  Noted the effects on social work interventions.  Found that partnership working is not always possible.  Raised concerns about the effects of violence on worker effectiveness.
2005	B Littlechild	"The Stresses Arising from Violence, Threats and Aggression against Child Protection Social Workers" BJSW  ENGLAND & FINLAND	Questionnaires and interviews with child protection workers in England and Finland. Comparative analysis of both sets of findings.	Explores the effects of violence and abuse on child protection workers.  Makes recommendations for policy and procedures.	Violence has an effect on staff retention.  There is a lack of a clear definition of violence in social work literature relevant to this topic.  Study revealed that staff had experienced more violence than they had stated in their questionnaire responses.



Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
					<p><b>Violence and abuse are normalised in practice.</b></p> <p><b>It was not clear how incidents of violence and abuse were recorded.</b></p> <p><b>Verbal abuse was not reported.</b></p> <p><b>Staff preferred to use supervision rather than the formal counselling serviced to discuss feelings and effects of violence and abuse.</b></p>
2006	C Trotter	<p>Working with Involuntary Clients: a guide to practice</p> <p><b>MIXED – Literature review</b></p>	<p>Literature review of current and past research and literature on the topic of client violence towards social workers.</p> <p>Widespread review inclusive of international studies on the topic.</p>	<p>How do you work with involuntary clients? The aim of this study is to help workers with involuntary clients come to terms with these issues. The main focal point of the study is 'direct practice'.</p> <p>Looks to present a framework for practice with involuntary clients, which is based on research about what works, a framework which makes sense of the multiple sources of knowledge which workers use on a day to day basis.</p>	<p>One American study of social services found that 3 per cent of workers had been shot at. It also found that 25 per cent of correctional workers had been attacked with knives.</p> <p>An Australian study found that 31 per cent of welfare workers had been physically assaulted during their careers, with many more having been abused verbally or threatened.</p> <p>It is argued that not all involuntary clients behave violently toward the worker.</p> <p>Dealing with violence is seen largely as an organisational responsibility. Stress and anxiety for the worker may be reduced with good supervision and effective training.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
2006	Waddington PAJ, Badger D & Bull	The Violent Workplace  <b>ENGLAND</b>	<p>Provides a sound empirical basis built by carrying out remote sensing cognitive interviews.</p> <p>54 Police, 62 Social Care Professionals, 22 A &amp; E workers, 20 Social Workers and 20 mental health staff were interviewed.</p>	<p>The threat of violence concerns most people most profoundly, wherever this is experienced. In recent years there has been a growing awareness of the workplace as a recognised site of violence, threat and menace for a significant number of people.</p> <p>This piece provides and promotes the moral dimension in experiences of violence, and concludes by considering the practical implications of this research for handling and managing those who have suffered from it.</p>	<p>4 mental health professionals, 5 accident and emergency staff, and 6 six social workers reported incidents of physical assault.</p> <p>Physical assaults normally consisted of punching and kicking, less commonly the use of weapons, including an stool, a dog lead, and an airgun.</p> <p>Social workers had reported incidents of captivity and described being held as a hostage by clients.</p> <p>Social workers were seriously disturbed by displays of anger even when they were not consummated in physical attack.</p> <p>There is a prejudice in practice that when one blames the victim that there is also fault to find with the 'incompetent' social worker, this then lends to staff who are disinclined to report even the most serious of violent attacks.</p> <p>Managing 'signal' incidents, zero tolerance, a clear complaints procedure for workers, handling difficult people better, and taking workplace violence seriously were recommended when looking to tame workplace violence.</p>

Date	Author	Study & Location	Methodological Orientation	Premise of Study	Main findings
2008	B Littlechild	<p>“Child Protection Social Work: risks of fears and fears of risks – impossible tasks from impossible goals? “</p> <p><b>SOCIAL POLICY &amp; ADMINISTRATION JOURNAL</b></p> <p><b>ENGLAND</b></p>	Literature Review	<p>That it is unrealistic to predict risk with current risk assessments.</p> <p>That workers have a level of fear arising from unknown risks.</p>	<p>Unrealistic expectation creates fear amongst child protection workers.</p> <p>Social workers are vilified by the media. Media reports always ignore the threat, abuse or violence workers may have experienced in high profile cases or where mistakes have been made.</p> <p>Government policies generally are a knee jerk reaction to serious case reviews in the media.</p> <p>Risk cannot be fully eliminated and individual events are impossible to predict.</p>

\*\* Studies highlighted in **BOLD** were specifically related to ‘child protection workers’.



## Appendix 5: Quantitative Findings – Charts

Figure 0.1

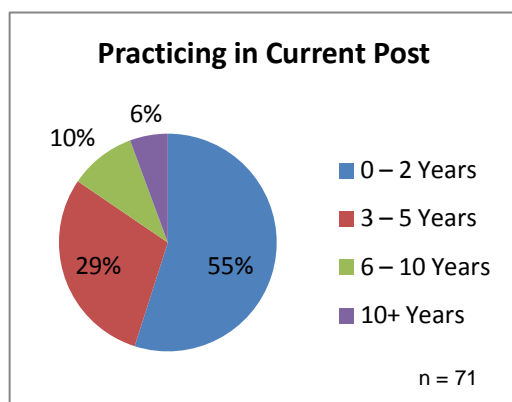


Figure 0.2

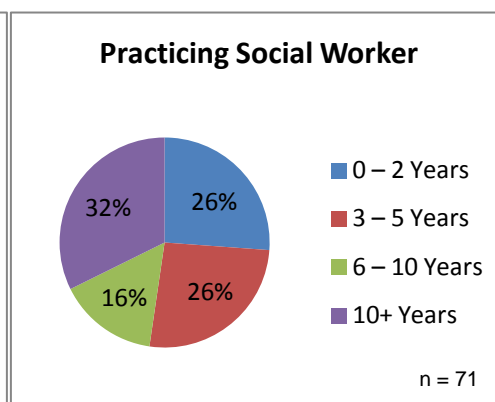


Figure 0.3

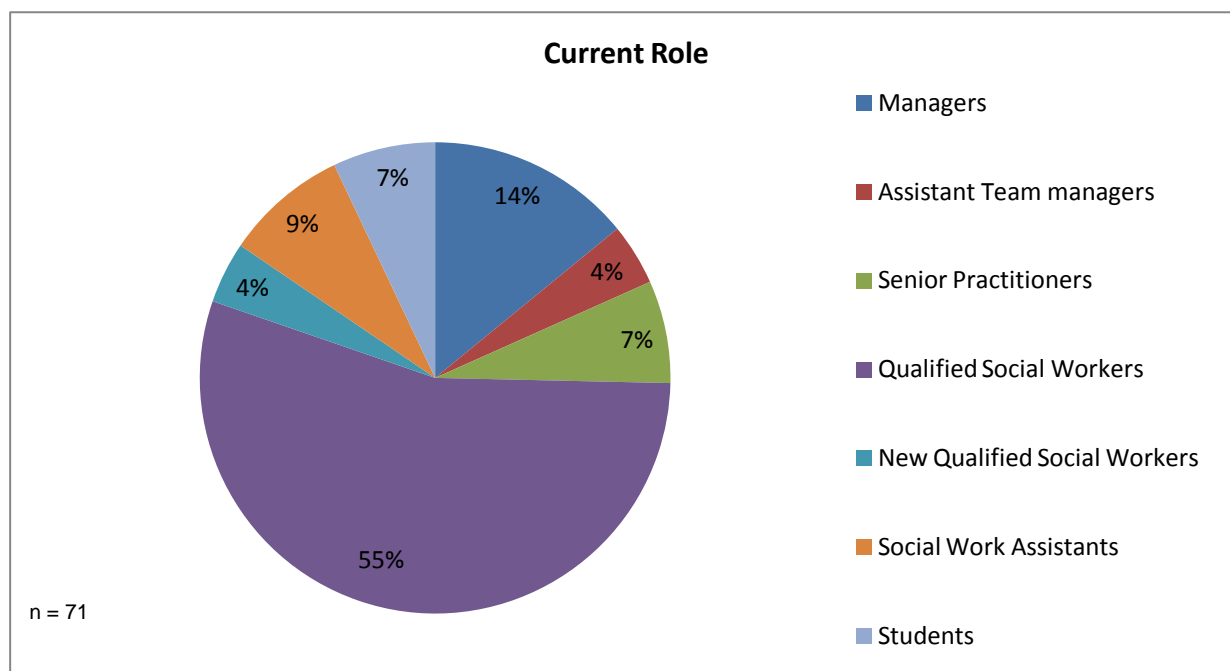


Figure 0.4

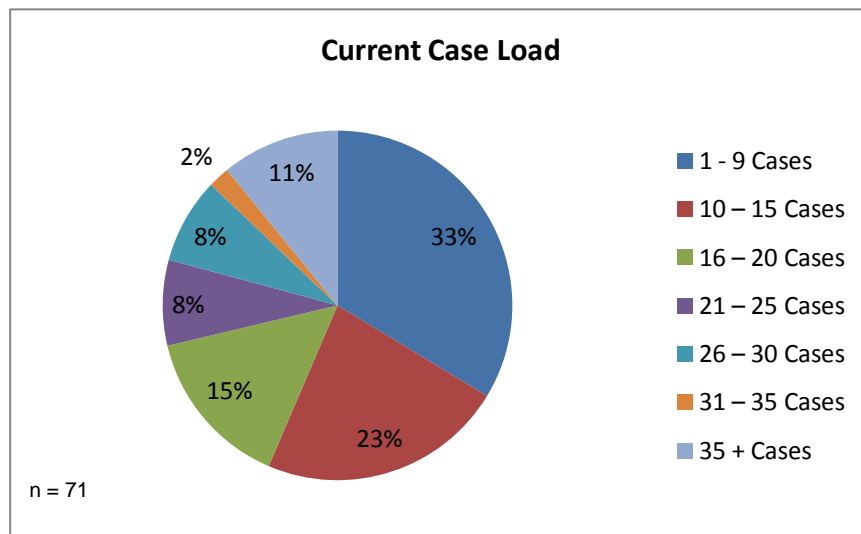
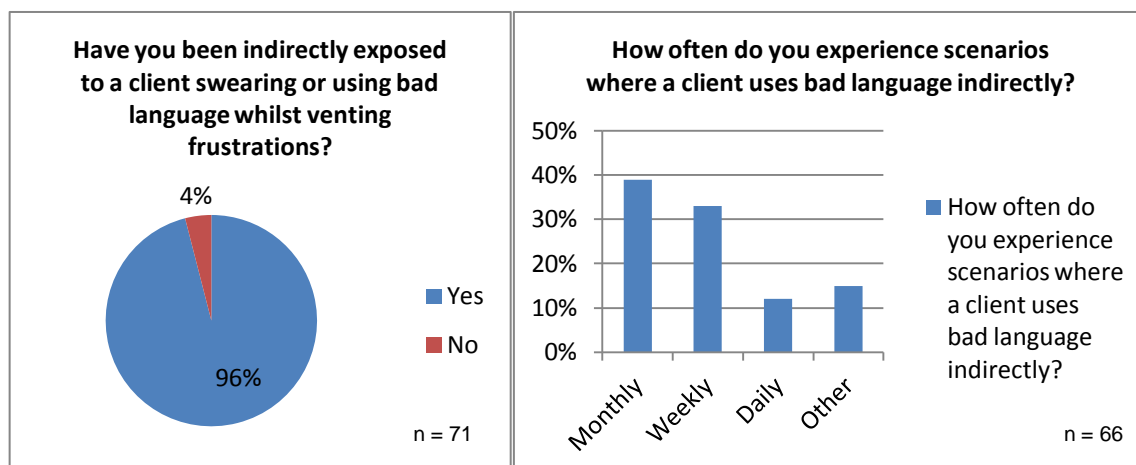
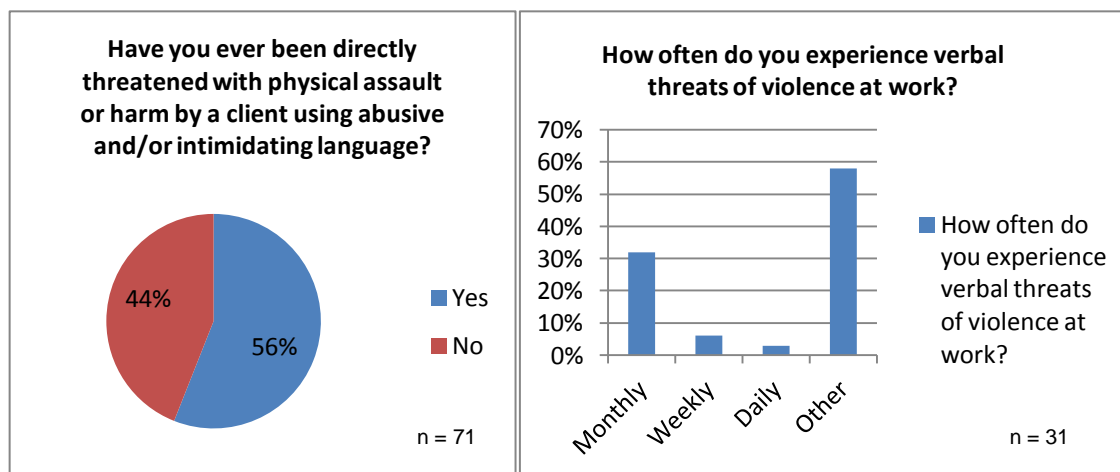


Figure 1.0



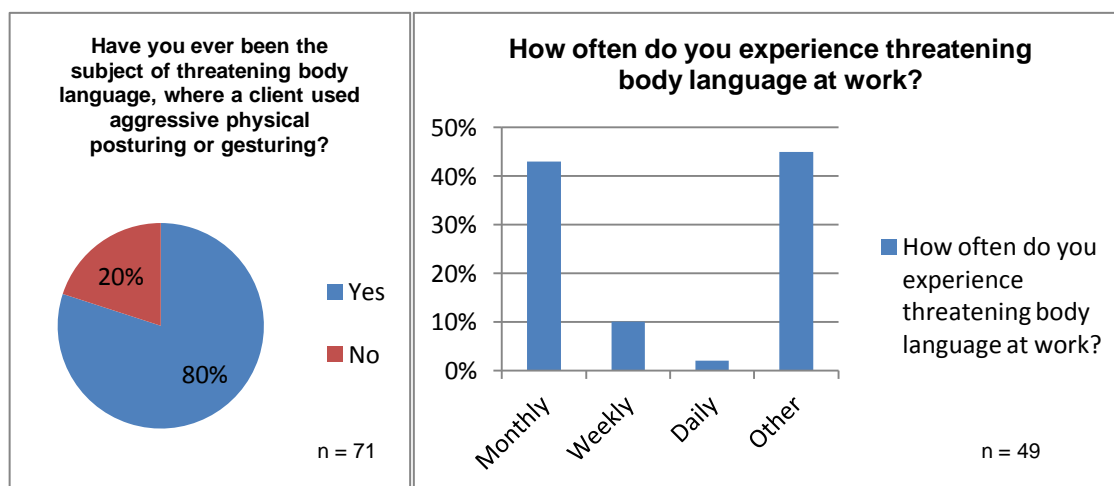
('Other' - Infrequently 3, every six months 3, once a year 3)

Figure 1.2



('Other' – Infrequently 6, rarely 8, dependent on client 2, every other month 2)

Figure 1.3



('Other' 45% - Infrequently 5, dependent on client 4, once a year 4, rarely 4, monthly 4)

Figure 1.4

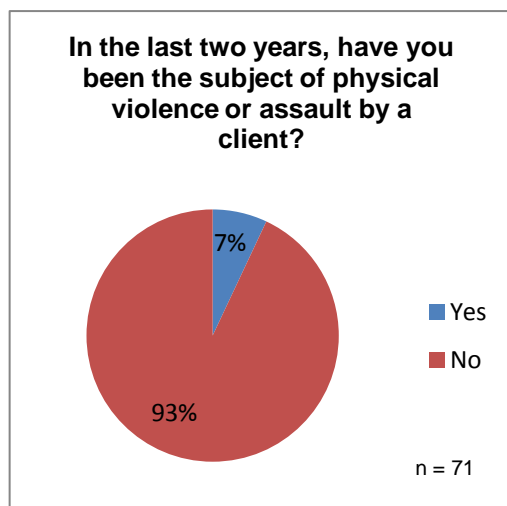


Figure 2.1

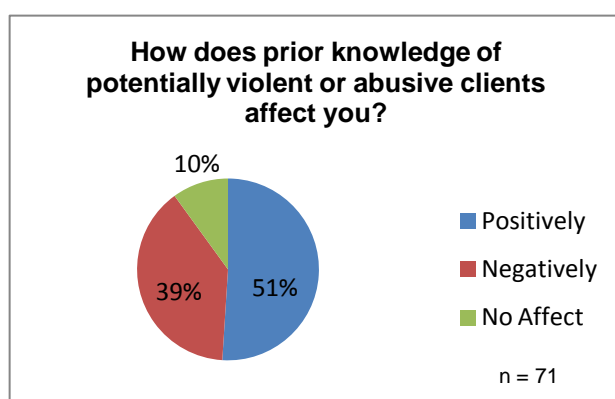
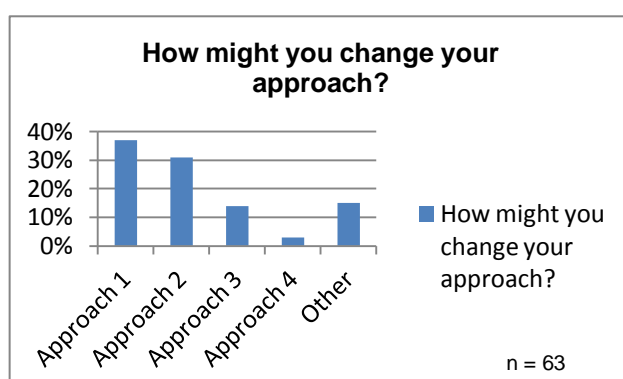


Figure 2.2



('Other' - Risk assessment 3, Joint visit (do not avoid HV) 3, Joint Visits 3, Office 2, Personal Strategy 8)



## Appendix 6: Council A's general risk assessment form

### GENERAL RISK ASSESSMENT FORM

**SERVICE AREA:** Safeguarding Division C&YP

**NAME OF ASSESSOR(S):**

**DATE OF ASSESSMENT:**

**FREQUENCY/DURATION:**

### APPENDIX 1

**SECTION/LOCATION:** Council offices

**Job Type/Work Activity:**

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
LONE WORKING	All workers in team	<p>All workers and Team Manager are required to keep an OUTLOOK calendar with start and end times of appointments including evening appointments.</p> <p>All workers have the Team Managers Mobile phone number which is accessible in an emergency 24/7. At w/e – EDT number should be in emergency number list along with TM home and mobile.</p>	<p>Supervisors to monitor workers calendars Check workers own lone working plan – car breakdown, accident and under threat from others.</p> <p>Lone working policy for TAB has been completed – This will be used for other placements teams</p>	TM & supervisors	June 09		L	L-M	L

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Car breaks down	Worker – may be in middle of no-where or on motorway	<p>Each worker has a BCC mobile kept fully charged and accessible.</p> <p>Workers will ensure their car is in working order (has it got MOT/insurance etc)</p> <p>Weather conditions – worker to assess risk of driving in adverse weather conditions</p> <p>Evening visit /w/e or in the dark – ie risk assess safety of going out .</p> <p>Whereabouts on the outlook calendar. Address and person details needed</p> <p>Office have contact details of next of kin etc If nearby – possible collect worker.</p>	<p>Check if staff are aware of the car use risk assessment – give to them if they do not.</p> <p>Check that all emergency numbers are in their mobile.</p> <p>Check that they are following mobile phone policy in terms of charging up etc.</p> <p>Are they members of AA/RAC</p> <p>Are they clear about the lone working policy and safety measures.</p> <p>Re assess at how much information needs to be given to BS and manager before a visit</p> <p>Send on course for lone working</p>	TM supervisors	May 09		L	L-M	L

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Car in accident	Worker may be injured or worse  Other persons may be injured or worse	Has work mobile to call in. Before going out – is car in working order (has it got MOT/insurance etc) Weather conditions Evening visit /w/e or in the dark – ie risk assess safety of going out. –If in evening or w/e manager informed prior to visits taking place  Whereabouts in the diary and on the outlook calendar.  Office have contact details of next of kin etc Action plan –Contact senior managers at once to inform if serious incident	Check that workers are aware of the lone working, car use and lone working policy - As above  Send on courses for lone working	TM	May 09		L-M	M-H	M

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Worker lost in car	Workers alone may be at risk from others around in area	As above No visiting new places in the dark alone or at weekends.	As above	TM	May 09		L-M	H	M
Worker attacked on way to visit – on foot or getting out of car /or road rage	All workers stress injury or worse	All as above. General personal safety policy applied.	Check peoples update personal safety training and plan	TM	May 09		L	H	M
Worker attacked in home -	All workers- as above	All As above An assessment should be done before going out to the home as to the danger somewhere might pose.	As above	TM	May 09		L	H	M

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Worker under threat from animals in the home	All workers-as above	If animal known to worker – will request that the dog , for example is in another room If no compliance – worker may say that they will not enter and postpone the visit.	Make sure all staff know that they can take the action described	TM	May 09		L	M-H	M
All the above at night or w/e	All workers	All above apply	Need to confirm policy for who to contact in an emergency –eg TM may be on holiday –away for the day and cannot be on duty every weekend.	TM or other Placement Managers and senior managers	June 09		L-M	H	M

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
<b>Lone Working</b>	<p>All social work staff visiting alone.</p> <p>Inform Manager if one is concerned about the client they are visiting. If necessary visit in pairs.</p> <p>Always have mobile phone with you. Check fully charged before visit.</p> <p>Have a personal alarm on your</p>	Diary movements always recorded up to date.	Pre set /speed dial to your office on your mobile phone, as defined by individual team	Post Holder/ Team Manager	15 May 2009	Arrangement in place	3	1	3

What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Abusive or difficult Phone calls	All staff – stress and anxiety	<ul style="list-style-type: none"> <li>• Staff training on managing telephone calls</li> <li>• Staff able to de-brief with supervisor.</li> <li>• Team Manager to be informed</li> </ul> Staff to know who to contact in absence of Manager.	Check that all staff are confident with these measures in supervision	TM	Ongoing		L-M	L-M	M



What are the Hazards?	Who might be harmed and how? (Who is at special risk?)	What are you already doing? (Current control measures, including those for people at special risk)	What further action is necessary? (Further Control Measures)	Action by whom	Action by when	Done ✓	Risk Factor taking all controls into consideration		
							Likelihood	Severity	Risk Level
Personal Safety during out of office visits	Post holder	<p>Apply above procedures for journeys.</p> <p>Completion of office diary</p> <p>Mobile phone to be carried at all times.</p> <p>Carry out home visits with a second person.</p> <p>Apply advice in personal safety code S7.0</p>	<p>Personal responsibility. Inform manager if there is a problem</p> <p>Get copy of home visit risk assessment from social worker prior to carrying out visit.</p>	Post holder/ manager	Ongoing		1	2	2

**Control Measures Acceptable:**

**SIGNED OFF BY:            DATE:**

**Further controls need to be in place and monitored as satisfactory before finally signing off this assessment**

**Likelihood of hazard happening:**

**Low, unlikely to happen = Score 1**

**Medium, could happen = Score 2  
2**

**High, will almost certainly happen = score 3  
score 3**

**Severity:**

**Minor e.g. cuts, bruises = Score 1**

**Major e.g. broken bones hospitalisation = score**

**Serious e.g. life threatening or fatal =**

**Overall Risk = Likelihood x Severity -**

**Score: 6 & 9 = High, urgent action required**

**Score: 3 & 4 = Medium, action to an agreed timetable**

**Score: 1 & 2 = low, or tolerable risk no action may be required**

**In completing the risk assessment either numbers or the descriptive words (high, medium, low) may be used in the risk level column.**

**Potential hazard - *item, substance or activity with the potential to cause harm.***

**A single hazardous activity can have many potential elements of harm, and it is important that those completing the risk assessment identify this, e.g. working with electricity (hazard) anticipated harm would be fire, explosion, electrocution and burns.**

**Control Measures – eliminate hazard, substitute with less hazardous alternative, prevent access to the hazard, control the amount of exposure, training, written instructions, personal protective equipment, welfare facilities, safety signs.**

## Appendix 7: Incident Report Form

### NEED TO KNOW NOTIFICATION

The Divisional Director, Divisional and YOS Managers must be notified of events involving the issues detailed in Appendix 1, if there is a possible reputational impact

Notifying Officer	
Name	
Job Title	
Team	
Office Location	
Telephone Number	
Mobile Number	
Name of Line Manager	
Date of initial notification	
Dates of further updates	
2 Subject (if Service User)	
Name	

Address	
Age	
Other names associated with subject	
Is the family aware?	
3 Need to Know incident or issue being reported	
Incident or issue	
<b>Background information</b> (BCC involvement, ie period of time, reason, details of child's legal status if the are looked after and Child Protection category, important dates (eg court case), implications for or potential impact on other parts of the service,	

names of staff involved)	
<b>Current situation</b>  (Details on the situation that has lead to the Notification)	
<b>4 Line Manager Recommendations</b>	
<b>Immediate Recommendations</b>	

<b>5 Senior Manager Action</b>	
Operations Manager	
Divisional Manager	
Divisional Director	
<b>Distribution List [Divisional Director]</b>	

<input type="checkbox"/>		Member
<input type="checkbox"/>		
<input type="checkbox"/>		Director of Children & Young People's Services
<input type="checkbox"/>		Divisional Director, Safeguarding
<input type="checkbox"/>		Divisional Manager, Prevention, Assessment and Protection
<input type="checkbox"/>		Divisional Manager, Permanency and Placements
<input type="checkbox"/>		Youth Offending Service Manager
<input type="checkbox"/>		Deputy YOS Manager
<input type="checkbox"/>		Team Manager
<input type="checkbox"/>		Emergency Duty Team Manager
<input type="checkbox"/>		Media Team Leader
<input type="checkbox"/>		
7 Communication [Divisional Director or Divisional Manager]		
Should the Executive and/or local member be informed?		

Should a statement be prepared for the media	
<b>8 Update on Initial Need to Know (if necessary) [Line Manager].</b>  Add in extra rows as updates are received	
Date	
Further information  (To be provided on events or actions that have taken place since the original notification)	
Date of further update  (If the situation continues)	
<b>9 Completion of Case [Line Manager]</b>	
Date	
Reasons for Completion  (Why the case worker and line manager feel the Need to Know has been resolved)	
Approved by Line Manager	
<b>10 Learning Points for Children and Young People's Services</b>	



<b>Issue</b>  (Details of the issue that has caused a problem during the events that have taken place)	
<b>Suggestions for learning for CYPs</b>  (Case worker and/or line manager suggestions to try and ensure that the issue does not recur)	

## NEED TO KNOW NOTIFICATION

### SERVICE USERS

Client death

Serious Child Protection incident likely to attract media interest

Significant and unexplained absence of children subject of a Child Protection Plan or Child Looked After

Any serious incident or accident or where there is a high risk of incident

Any serious injury or accident in significant, unusual and unexpected circumstances to a service user in non-BCC premises, eg residential care home/secure unit

Serious Incident - Whilst supervised by the YOS a young person is charged with a serious offence, dies in a secure setting, dies or attempts suicide or is a victim of a serious offence

Serious Offence committed by a young person likely to attract media interest

### STAFF

Death or serious injury

Significant accidents or injuries at work – incident forms must be completed

Involvement in violent incidents

Allegations of, arrest or conviction for criminal offences

## SERVICE PREMISES

Serious or significant damage resulting from flood, accidental fire, etc

Significant vandalism or burglary

Any incident of arson

## CONTROVERSIES

Significant COMPLAINTS about our service or those that we commission

## SIGNIFICANT PROCEEDINGS

Likely to excite public and/or media interest

With potentially high financial or policy implications

## COMMUNICATION WITH THE MEDIA

When receiving communication from the media the following actions must be taken:

No answer is given to an enquiry from the media. The enquiry *must* be noted and the media *must* be advised politely that they will receive a response shortly.

The enquiry *must* be e-mailed/faxed immediately to the Communications Team and they *must* be telephoned on

*Where a service user threatens to go to the press/TV* the line manager *must* be informed immediately. The line manager *must* inform the Divisional Director, the Divisional Managers and the Communications Team.

The Divisional Director will agree any response to the media. In the absence of the Divisional Director the Divisional Managers will undertake this responsibility.

September 2009

## Appendix 8: Qualitative Findings – Charts

Figure 0.1

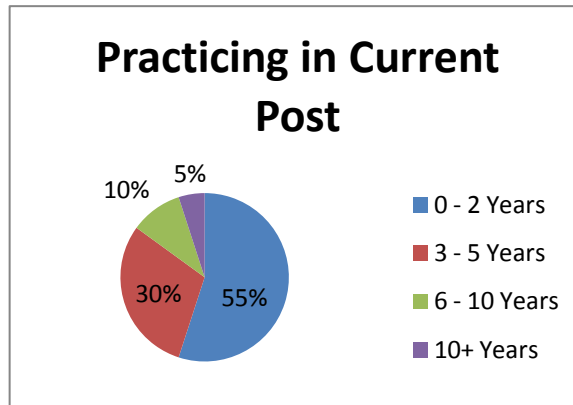


Figure 0.2

